Notre Dame NROTC Administrative Checklist

Review Items Checklist

Candidate Signature

Review the following documents in their entirety. Initial in all boxes applicable to certify that you have reviewed the required documents prior to your arrival for administrative in-processing. All materials to be reviewed are on our website at https://nrotc.nd.edu/incoming-midshipmen/.

Annual Certificate of Physical Condition	Recruit/Trainee Prohibited Activities
Classified Information NDA	SCHOLARSHIP MIDSHIPMEN ONLY
Debarment Statement	Acceptance and Oath of Office
Drug and Alcohol Statement	Enlistment/Reenlistment Document
Elective Surgery Statement	Scholarhsip Benefit Election Form
Extremism Questionnaire	Scholarship Service Agreement
NROTC Academic Standards	MARINE OPTION ONLY
NROTC Honor Code	Officer Cadndidate School SOU
Physical Activity Risk Factor Questionnaire	
Physical Fitness Standards	
Privacy Act Statement	
Questionnaire for National Security Positions	

Date

Document Completion Checklist

Review and fill out the following documents except for the signature and witness blocks. You will submit the electronic copy to NROTC unit staff. Instructions on how to submit will be in your school email inbox. Initial in all boxes applicable to certify that you have submitted the completed forms to the NROTC unit staff.

All materials to be completed and submitted to the NROTC unit are on our website at https://nrotc.nd.edu/incoming-midshipmen/.

	Copy of Proof of Citizenship		Required Medical Information (see next page)
	Copy of Proof of Medical Insurance		Tattoo Screening Form (Navy/Marine Corp Specific)
	Copy of Social Security Number (SSN) Card		SCHOLARSHIP MIDSHIPMEN ONLY
	Authorization for Disclosure		SGLI (SGLV 8286)
	Degree Completion Plan (Draft)		
	Direct Deposit Sign-Up Form		
	Record of Emergency Data		
Candio	date Printed Name		
Candio	date Signature	_	Date

NROTC Required Medical Information

Medica	l Eligibility (one of the following)	
	DoDMERB Qualification/Waiver Letter	
	Sports Physical Evaluation History and Physical Example 2. List of ALL prescriptions and over-the-co List of ALL allergies, reactions, and EpiPo	unter medications
Immuni	ization Record	
	One-Dose of Quadrivalent Meningococcal Vaccine	(for example MCV vaccine) on or after 16th birthday
	Two Doses of Mumps, Measles, and Rubella (MM	R) Vaccine at least 28 days apart
	Two Doses of Varicella (Chicken Pox) Vaccine or	Fiter Test From Lab Documenting Immunity
	One-Dose of TDaP Vaccine within the last 10 years	S
	following vaccine protocols; At least one dose of Ja	Y RECOMMENDED that students arrive fully and the high transmissibility of COVID-19. It is tion status because there may be future protocols e not vaccinated and the readiness of military ly vaccinated a person must have received one of the
	Seasonal Influenza	
Require	ed Lab Tests	
	Sickle Cell: Sickle Cell Solubility Lab Test results Preparation, Sickle Cell Test, and Sickle Prep are a notes stating a student's Sickle Cell Trait status WI	ll common names for the test we require). Provider
	Proof of Blood Type	
	Tuberculosis (TB) Test; PPD Skin Test	
Candio	date Printed Name	
Candio	date Signature	Date