

Please fill out the attached document "New ROTC Cadet In-processing".

Type in all the info on the highlighted sections (light blue color).

Skip to the next line if you do not know the answer.

This is separated into five sections:

Section one: PROSPECT/CADET INFORMATION

1. Start from the top of the page. School of attendance is the name of the School you will complete your studies (Example: Washburn, Mid-America, Univ. of Kansas, KCKCC, etc ...). If you don't know the schools address, just leave it blank and I will get the address for you.
2. When entering your name: Please enter your full name to include middle name (example: ROBERTSON, Robert James). DO NOT enter nick names (example: ROBERTSON, Robbie J.).
3. SSN: type in your Social Security number (Numbers only, no dash)
4. "Local Address" - this is the address where you will be living during your school semester.
5. Local Phone#: This is a land line number to the Local address. If you do not have a land line, type in your Cell number.
6. "Permanent Address" – This is the address where your parents live.
7. Permanent Phone#: This is your parent's phone number.
8. "Religious Pref" – What is your religion? (example: Baptist, Church of Christ, Catholic, Methodist, No Preference, etc ...). Do not type Christian (we need to know which Christian denomination).

Section two: PHYSICAL/MEDICAL INFORMATION

1. These are yes or no questions. If you answer yes to any of these, please give a brief explanation.
2. ASTHMA – Have you ever had or do you now have?
3. ALLERGIES – Do you have any allergies? (example: Bee stings, insect bites, allergic to peanuts, etc....)
4. On Meds – Are you on any type of medication at this time?

Section Three: ACADEMIC INFORMATION

Self explanatory

Section four: SCHOLARSHIP INFORMATION

Self explanatory

Section Five: LATERAL ENTRY INFORMATION

Self explanatory

At the bottom of the page is Next of Kin information - IF YOU GET HURT DURING TRAINING WHO SHOULD WE CONTACT (Mom, Dad, Brother, sister, etc...)? We need name, relationship to you, address and phone number for this person. We also need your Dentist's information, Dentist name. Dentist's office address and office phone number.