

VOLUNTARY EDUCATIONAL STAFF AGREEMENT

For use of this form, see USMEPCOM Reg 601-4

1. Name of MEPS:

2. The _____ agrees to provide _____ test proctors and/or _____
(Name of School)

test administrators at no cost for a Student ASVAB test session to be administered on _____

This agreement serves as a record from _____
(Name of School)

(School address and phone number)

to Headquarters, U.S. Military Entrance Processing Command, documenting this action.

3. Printed Name of MEPS or OPM Test Administrator:

4. MEPS or OPM Test Administrator signature:

5. Date:

6. Printed Name of School Official (Last, First, MI):

7. School Official signature:

8. Date: