



The DoD Overseas Testing Program STUDENT AND ENLISTMENT ASVAB

OVERSEAS DESKTOP REFERENCE





DEPARTMENT OF DEFENSE
HEADQUARTERS, UNITED STATES MILITARY ENTRANCE PROCESSING COMMAND
2834 GREEN BAY ROAD
NORTH CHICAGO, ILLINOIS 60064-3094

MOP-TD

31 May 2006

MEMORANDUM FOR: SERVICES ASVAB OVERSEAS PROGRAM MANAGERS
(USA, USN, USAF)
CDR, E SECTOR, USMEPCOM
CDR, W SECTOR, USMEPCOM
CDR, NEW YORK MEPS
CDR, HONOLULU MEPS
TESTING SECTION, NEW YORK MEPS
TESTING SECTION, HONOLULU MEPS

SUBJECT: The DoD Overseas Testing Program Guidance

Student and Enlistment testing in overseas regions is important to the USMEPCOM accessions mission. Approximately 500 enlistment tests and 1300 student tests were administered overseas in FY 05. Working hand-in-hand with overseas recruiters, the test administrators play an important role in the overseas ASVAB testing program. This guidance is provided to clarify policies and procedures and to provide training and continuity for the 40+ sites around the world.

The DoD Overseas Testing Program Guidance was last published in May 2003. Among other updates, this revision includes the new chapter in USMEPCOM 611-1 focusing on overseas testing, Personal Digital Assistance (PDA) guidance, and updated overseas code listings. This reference guide is intended as a "one source" document to assist overseas administrators with required forms (available at www.mepcom.army.mil) and instructions, materials and to provide clarification on other policies.

For more information, please contact the Service representative responsible for the testing site overseas (see atch 2) or the HQ USMEPCOM Overseas Testing Program Manager at 847-688-3680 x7515.

FOR THE COMMANDER:

//signed//
DONALD D. HILL
Chief, Testing Division

8 Attachments:

1. USMEPCOM Regulation 611-1, Chapter 7, Overseas Testing
2. Services ASVAB Overseas Program Manager Listing
3. USMEPCOM Form 680-3A-E w/Instructions
4. USMEPCOM Form 611-1-2-R-E w/Instructions
5. USMEPCOM Form 611-1-7-R-E, w/Instructions
6. USMEPCOM Form 601-4-3-E, w/Instructions
7. ASVAB Testing Material List
8. Personal Digital Assistant (PDA) Information Memorandum

The DoD Overseas Testing Program Guidance

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Attachment 1

USMEPCOM Regulation 611-1, Chapter 7 Overseas Testing

USMEPCOM Regulation 611-1 (Overseas Only)

Chapter 7 Overseas Testing

7-1. Overview

The overseas testing program is administered on overseas bases and DOD high schools for both the enlistment and student testing programs. The military service of the base or school conducting the tests is responsible for testing. Administration and inventory is managed through individual Service program managers. This chapter pertains to the two MEPS who service overseas sites: New York and Honolulu.

7-2. Enlistment testing program responsibilities

a. MAPWG representatives will—

(1) Ensure Services appoint an ASVAB overseas program manager and identify to MAPWG representative as the point of contact for USMEPCOM ASVAB overseas program manager.

(2) Review and approve ASVAB overseas policy changes/updates and coordinate with Services ASVAB overseas program managers and overseas recruiting Services.

b. HQ USMEPCOM will—

(1) Ensure USMEPCOM forms used to support the Services ASVAB overseas program are available at USMEPCOM Web site <http://www.mepcom.army.mil/>.

(2) Coordinate with the Services ASVAB overseas program managers for implementation of all procedural and/or policy changes for dissemination to overseas testing personnel.

(3) Report testing procedural and documenting problems to appropriate Service ASVAB overseas program manager to identify trends and determine corrective action.

(4) Maintain ample test materials at United States Army Publishing Distribution and Operations Facility to support the Services ASVAB Overseas Program.

(5) Provide training materials as needed to overseas Services test administration personnel and recruiters to support this regulatory guidance.

c. Services ASVAB overseas program manager will—

(1) Maintain appointment orders of authorized testing personnel and provide roster of authorized ASVAB testing personnel to HQ USMEPCOM.

(2) Notify HQ USMEPCOM Testing Division on following occurrences:

(a) All test loss or compromise within one working day after occurrence.

(b) Change of ASVAB overseas testing personnel. Provide updated roster upon the departure and/or arrival of new personnel, and prior to assuming testing duties.

**USMEPCOM Regulation 611-1
(Overseas Only)**

- (3) Identify training requirements to HQ USMEPCOM Testing Division.
- (4) Disseminate policy and/or procedural changes to overseas testing personnel.
- (5) Establish acquisition procedure for testing personnel to obtain all required ASVAB testing materials.
- (6) Ensure testing personnel conduct inventory of ASVAB materials annually and upon departure and arrival of testing personnel.
- (7) Ensure all testing locations have a numerical identifier, which will be used by the Honolulu or New York MEPS as the MET identification.

d. Military Services overseas testing personnel will—

- (1) Administer the enlistment test to applicants who provide a completed original USMEPCOM Form 680-3A-E.
 - (2) Administer the enlistment test using Test Forms 25a, 25b, 26a & 26b according to DD Form 1304-2AM (Manual for Administration – Enlisted (ASVAB)).
 - (3) Prohibit recruiters from the testing area at all times.
 - (4) Recruiting personnel, and/or designated career recruiters are prohibited from performing duties as a TCO and/or TA for the ASVAB.
 - (5) Calculate only the unverified AFQT score for applicants using the PDA AFQT calculator (refer to PDA User's Guide for instructions).
 - (6) Document the unverified AFQT score on USMEPCOM Form 611-1-2-R-E. Provide the form to the applicant's recruiter when present. If the recruiter is not at the test site, give the unverified score to the applicant in a sealed envelope addressed to the recruiter. Any other delivery method will require recruiter-initiated coordination with the TA.
 - (7) Retain copies of completed enlistment answer sheets on file under record number 601-222d. Copies of the answer sheet are to be handled as controlled test materials until destroyed.
 - (8) Mail the following documents via FedEx, certified or registered, to the overseas supporting MEPS within two working days after administering the test:
 - (a) USMEPCOM Form 680-3A-E.
 - (b) DD Form 1304-2AS (Enlistment Answer Sheet).
- Note:** For use, refer to DD Form 1304-2AM.
- (c) USMEPCOM Form 611-1-7-R-E.
 - (9) USMEPCOM forms are available via the internet at <http://www.mepcom.army.mil>.

USMEPCOM Regulation 611-1 (Overseas Only)

e. Recruiting Services will—

(1) Ensure that a USMEPCOM Form 680-3A-E is completed for each applicant and the original is presented to the test administrator prior to the administration of the enlistment test.

(2) Assume responsibility for all other qualification requirements that affect the accession of overseas applicants, i.e. fingerprinting, background screening, medical examinations, etc.

Note: Recruiting personnel, and/or designated career recruiters are prohibited from performing duties as a TCO and/or TA for the ASVAB.

f. New York and Honolulu MEPS will—

(1) New York MEPS provides official ASVAB scoring support for European, Caribbean, and Central American areas.

(2) Honolulu MEPS provides official ASVAB scoring support for the Pacific and Far East areas.

(3) Ensure all ASVAB testing sites have codes that start with the MEPS identification followed by “88”.

(4) Score the enlistment ASVAB and process through USMIRS within two working days of receipt.

(5) Attempt to resolve all procedural and/or policy violations with the responsible overseas test personnel when tests are forwarded with discrepancies.

(6) Report all procedural and/or policy discrepancies to HQ USMEPCOM, ATTN: J-3 (Operations), Testing Division.

7-3. Confirmation testing

When a confirmation test is required overseas, the ideal situation is to have the applicant take the test at a different site than where the test prompting a confirmation test was administered. In the event that the confirmation test must be taken at the original site, all reasonable efforts must be made to ensure test integrity. For example, a different TA must administer the test, a TA from another site administers the test (e.g., a visiting MEPS TA), or a request is made to the local education office for test administration. In any situation where there is only one available testing location, the test will be administered at that location. The ideal situation would be to have another TA administer the test. To ensure proper scoring procedures, the TA must ensure that block 12 on page 1 of the answer sheet is filled in prior to forwarding to the servicing MEPS. In addition, the TA will annotate “CONFIRMATION TEST” with a red felt tip pen along the left crease of the answer sheet. Reference chapter 6 for further details.

7-4. Special purpose test

When the services administer a special purpose test, they will procure their own test materials from their TCOs and provide their own testing facility. In addition, results of special purpose tests administered by the services will not be entered into the USMIRS, with the exception of those tests administered at overseas test sites. Special purpose tests conducted by overseas TCOs are processed through New York MEPS and Honolulu MEPS for their assigned area of

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responsibility. Those two MEPS are required to enter scores from those special purpose tests conducted by overseas TCOs in the USMIRS.

7-5. Student testing program responsibilities

a. MAPWG representatives will—

(1) Ensure Services appoint a Student ASVAB overseas program manager and identify to MAPWG representative as the point of contact for USMEPCOM ASVAB overseas program manager.

(2) Review and approve Student ASVAB overseas policy changes/updates with Services ASVAB overseas program managers and recruiting Services.

b. HQ USMEPCOM will—

(1) Ensure USMEPCOM forms used to support the Services ASVAB Overseas Program are available at USMEPCOM Web Site, <http://www.mepcom.army.mil/>.

(2) Coordinate with the Services ASVAB overseas program managers for implementation of all procedural and/or policy changes for dissemination to overseas testing personnel.

(3) Report overseas test scores and documenting problems, when identified to appropriate Service ASVAB overseas program manager.

(4) Provide training materials as required to overseas Military Services test administration personnel, recruiters and Department of Defense Dependent Schools (DoDDS) guidance counselors to support this regulatory guidance.

(5) Maintain ample test materials at United States Army Publishing Distribution and Operations Facility to support the ASVAB Overseas Program.

(6) Provide training materials as required to overseas Services test administration personnel and recruiters to support this regulatory guidance.

c. Services ASVAB overseas program manager will—

(1) Maintain appointment orders of authorized testing personnel and provide roster of authorized ASVAB testing personnel to HQ USMEPCOM.

(2) Notify HQ USMEPCOM Testing Division on following occurrences:

(a) All test loss or compromise within one working day after occurrence.

(b) Change of ASVAB overseas testing personnel. Provide updated roster upon the departure and/or arrival of new personnel, and prior to assuming testing duties.

(3) Identify training requirements to HQ USMEPCOM Testing Division.

(4) Disseminate policy and/or procedural changes to overseas testing personnel.

USMEPCOM Regulation 611-1 (Overseas Only)

(5) Establish acquisition procedure for testing personnel to obtain all required ASVAB testing materials.

(6) Ensure testing personnel conduct inventory of ASVAB materials annually and upon departure and arrival of testing personnel.

(7) Monitor to ensure overseas DoDDS have a school code issued by Honolulu or New York MEPS prior to testing.

d. Military Services testing personnel will—

(1) Administer student ASVAB using Test Forms 23a, 23b, 24a & 24b only.

(2) Administer the student test in accordance with the DD Form 1304-5AM (ASVAB Career Exploration Program, Manual for Administration Student), and mail, via FedEx, testing documents to Honolulu or New York MEPS.

(3) Review USMEPCOM Form 601-4-3-R-E (Student ASVAB Test Record) to ensure ample test materials are available and confirm test date scheduled by the recruiter at the school.

(4) Prior to test administration, obtain the proctor's signature certifying they understand their test proctor duties and responsibilities. Signature block is on the backside of USMEPCOM Form 601-4-3-R-E.

(5) Mail the following documents via FedEx, certified or registered mail to the supporting overseas MEPS within two working days after administering the student test:

(a) USMEPCOM Form 601-4-3-R-E.

(b) DD Form 1304-5AS, Student Answer Sheet for use (DD Form 1304-5AM).

e. Recruiting Services will—

(1) Military recruiters assigned to the school have the responsibility for coordinating, scheduling and providing proctor support, for student testing.

(2) Military recruiters shall not handle, distribute, or collect test materials.

(3) Proctors will read the reverse of USMEPCOM 601-4-3-R-E, Test Proctor Duties/Responsibilities Briefing and sign the certification of understanding at the bottom of the form.

f. New York and Honolulu MEPS will—

(1) New York MEPS provides official ASVAB scoring support for European, Caribbean, and Central American areas.

USMEPCOM Regulation 611-1
(Overseas Only)

(2) Honolulu MEPS provides official ASVAB scoring support for the Pacific and Far East areas.

(3) Score and return the Student ASVAB printed results to DoDDS and Military Services within 10 working days of receipt.

(4) Attempt to resolve all procedural and/or policy violations with the responsible overseas test personnel when tests are forwarded with discrepancies.

(5) Honolulu MEPS will issue school codes with the first two digits of "58".

(6) New York MEPS will issue school codes with the first two digits of "57".

Attachment 2

Services ASVAB Overseas Program Managers

**Services ASVAB Program Managers
(Overseas Only)**

United States Army

Ms. Aloha Wilson
Army Personnel Testing Program Manager
Education Division, US Army Human Resources Command
COMM: 703-325-0475
DSN 221-0475
aloha.wilson@us.army.mil
<https://www.armyeducation.army.mil/>

Alternate:
Marcus Williams, US Army Human Resources Command
marcus.williams13@us.army.mil
COMM 703-325-9812 / DSN 221-9812

United States Air Force

Brian G. Chasse, SMSgt, USAF
Superintendent, Air Force Testing
Enlisted Promotions & Testing Branch
HQ AFPC/DPPPWT
COMM: 210-565-2265/3900
DSN: 665-2265
FAX: 665-2442
brian.chasse@randolph.af.mil

United States Navy

Lisa J. Mills, PhD
Personnel Psychologist
Navy Selection & Classification (N141)
FOB2 Arlington, VA
COMM: 703-614-4295
DSN 224-4295
FAX: 703-695-9915
Lisa.mills@navy.mil or AFCTHelpdesk@navy.mil

**Services ASVAB Program Managers
(Overseas Only)**

NEW YORK MEPS

Overseas Test Coordinator - newytc08@mepcom.army.mil

TCO - nyktco@mepcom.army.mil

TST - nyktnco@mepcom.army.mil

Commercial: 718-630-4431

FAX - 718-630-4862

Mailing Address:

Department of Defense

New York MEPS

ATTN: Test Control Officer

116 White Ave., Fort Hamilton

Brooklyn, New York 11252-6700

HONOLULU MEPS HONOLULU MEPS

Overseas Test Coordinator - honstp@mepcom.army.mil

TCO - hontco@mepcom.army.mil

TST - hontnco@mepcom.army.mil

Commercial: 808-471-8725 x 241/240

Mailing address:

Department of Defense

Honolulu MEPS

ATTN: MCO-WHO-OT

490 Central Avenue

Pearl Harbor, HI 96860-4958

Attachment 3

**USMEPCOM Form 680-3A-E
Request for Examination, with instructions**

FOR USE OF THIS FORM, SEE USMEPCOM REG 680-3	REQUEST FOR EXAMINATION THE INFORMATION PROVIDED CONSTITUTES AN OFFICIAL STATEMENT	FOR OFFICIAL USE ONLY															
PRIVACY ACT STATEMENT AUTHORITY: Sections 505, 508, 510, and 3012 of Title 10 U.S. Code and Executive Order 9397. PRINCIPAL PURPOSE: The requested information on this form will be used to properly process and identify the individual requesting an examination at a military entrance processing station (MEPS). ROUTINE USE: Record is maintained with other enlistment processing records. DISCLOSURE: Voluntary; refusal to provide required data could result in denial of enlistment.																	
A. SERVICE PROCESSING FOR <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td colspan="6" style="padding: 2px;">NUMBER OF DAYS:</td> </tr> </table>							NUMBER OF DAYS:						B. PRIOR SERVICE <input type="checkbox"/> YES <input type="checkbox"/> NO	C. SELECTIVE SERVICE CLASSIFICATION	D. SELECTIVE SERVICE REGISTRATION NUMBER		
NUMBER OF DAYS:																	
1. SOCIAL SECURITY NUMBER <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; border: 1px solid black; height: 20px;"></td> <td style="width:10%; border: 1px solid black; height: 20px;"></td> <td style="width:10%; border: 1px solid black; height: 20px;"></td> <td style="width:10%; border: 1px solid black; height: 20px;"></td> <td style="width:10%; border: 1px solid black; height: 20px;"></td> <td style="width:10%; border: 1px solid black; height: 20px;"></td> <td style="width:10%; border: 1px solid black; height: 20px;"></td> <td style="width:10%; border: 1px solid black; height: 20px;"></td> <td style="width:10%; border: 1px solid black; height: 20px;"></td> <td style="width:10%; border: 1px solid black; height: 20px;"></td> <td style="width:10%; border: 1px solid black; height: 20px;"></td> <td style="width:10%; border: 1px solid black; height: 20px;"></td> </tr> </table>													2. NAME (Last, First, Middle Name (and Maiden, if any), Jr., Sr., etc.)				
3. CURRENT ADDRESS <i>(Street, City, County, State, Country, ZIP Code)</i>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> </tr> </table>							4. HOME OF RECORD ADDRESS <i>(Street, City, County, State, Country, ZIP Code)</i>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> </tr> </table>								
5. CITIZENSHIP (X One)		6. SEX (X One)		7.a. RACIAL CATEGORY (X one or more)													
<input type="checkbox"/> a. U.S. AT BIRTH (If this box is marked, also X (1) or (2))		<input type="checkbox"/> a. MALE		<input type="checkbox"/> (1) AMERICAN INDIAN/ ALASKA NATIVE													
<input type="checkbox"/> (1) NATIVE BORN		<input type="checkbox"/> b. FEMALE		<input type="checkbox"/> (4) NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER													
<input type="checkbox"/> (2) BORN ABROAD OF U.S. PARENT(S)		8. MARITAL STATUS (Specify)		<input type="checkbox"/> (2) ASIAN													
<input type="checkbox"/> b. U.S. NATURALIZED		<input type="checkbox"/> (3) BLACK OR AFRICAN AMERICAN		<input type="checkbox"/> (5) WHITE													
<input type="checkbox"/> c. U.S. NON-CITIZEN NATIONAL		9. NUMBER OF DEPENDENTS		7.b. ETHNIC CATEGORY (X One)													
<input type="checkbox"/> d. IMMIGRANT ALIEN (Specify)		<input type="checkbox"/> (1) HISPANIC OR LATINO		<input type="checkbox"/> (2) NOT HISPANIC OR LATINO													
<input type="checkbox"/> e. NON-IMMIGRANT FOREIGN NATIONAL (Specify)		<input type="checkbox"/> f. ALIEN REGISTRATION NUMBER (As applicable)		10. DATE OF BIRTH (YYYYMMDD)													
<input type="checkbox"/> f. ALIEN REGISTRATION NUMBER (As applicable)		11. RELIGIOUS PREFERENCE (Optional)		12. EDUCATION (Yrs./Highest Ed. Gr. Completed)													
<input type="checkbox"/> (1st) <input type="checkbox"/> (2nd)		<input type="checkbox"/> (1st) <input type="checkbox"/> (2nd)		13. PROFICIENT IN FOREIGN LANGUAGE (X One) <i>(If Yes, specify)</i> <input type="checkbox"/> YES <input type="checkbox"/> NO													
14. VALID DRIVER'S LICENSE (X One) <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(If Yes, list State, number, and expiration date)</i>			15. PLACE OF BIRTH (City, State, and Country)														
16. APTITUDE:																	
<input type="checkbox"/> a. ASVAB REQUIRED TO ENLIST? <i>(X One)</i> <input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> c. TEST TYPE <input type="checkbox"/> INITIAL <input type="checkbox"/> 1ST RETEST <input type="checkbox"/> 6 MONTH RETEST		<input type="checkbox"/> e. PREVIOUS TEST VERSIONS 1. 2.													
<input type="checkbox"/> b. ENLIST UNDER STUDENT TEST SCORES? <i>(X One)</i> <input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> [] SPECIAL <input type="checkbox"/> 2ND RETEST		<input type="checkbox"/> f. PREVIOUS TEST DATES (YYYYMMDD) 1. 2.													
<input type="checkbox"/> [] CONFIRMATION <input type="checkbox"/> IMMEDIATE RETEST AUTHORIZED		17.a. RECRUITER ID/SSN		17.b. STATION ID													
18. TEST ADMINISTRATOR SSN/ID		19. TEST ADMINISTRATOR SIGNATURE		20. MEDICAL:													
<input type="checkbox"/> a. MEPS MEDICAL EXAM REQUIRED TO ENLIST? <i>(X One)</i> <input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> b. EXAM TYPE <input type="checkbox"/> FULL <input type="checkbox"/> SPECIAL <input type="checkbox"/> RE-EXAM <input type="checkbox"/> OTHER		<input type="checkbox"/> c. DATE LAST FULL MEDICAL EXAM (YYYYMMDD)													
21. APPLICANT'S SIGNATURE			22. MIRS CODING														
_____ <i>(Signature of Applicant)</i>			<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> <td style="width:15%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td style="text-align: center; font-size: 8px;">WKID</td> <td style="text-align: center; font-size: 8px;">ST</td> <td style="text-align: center; font-size: 8px;">DATE</td> <td style="text-align: center; font-size: 8px;">INT</td> <td style="text-align: center; font-size: 8px;">DATE</td> <td style="text-align: center; font-size: 8px;">INT</td> </tr> </table>									WKID	ST	DATE	INT	DATE	INT
WKID	ST	DATE	INT	DATE	INT												
23. APPLICANT CERTIFICATION IN PRESENCE OF TEST ADMINISTRATOR I certify that I am the person identified on this form:			24. RIGHT THUMBPRINT RIGHT THUMBPRINT, FIRST ATTEMPT (AFFIX THUMBPRINT WITH THUMBNAIL POINTED TO THE LEFT)														
Photo ID? (X One) <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, type/organization _____ ID Number _____			IF SECOND ATTEMPT IS REQUIRED, TURN FORM OVER (TOP OF FORM ON THE BOTTOM) AFFIX RIGHT THUMBPRINT ON UPPER RIGHT CORNER, THUMBNAIL POINTED TO THE LEFT														
25. APPLICANT CERTIFICATION IN PRESENCE OF RECRUITING PERSONNEL I certify that I am the person identified on this form and the information about me shown there, including my Social Security Number is all true and correct to the best of my knowledge. I also certify that:			26. APPLICANT'S CURRENT MEDICAL INSURER NAME <i>(If none, sign your complete name to affirm you have no current medical insurer):</i>														
<input type="checkbox"/> a. I have never been tested ANYTIME or ANYWHERE with the ASVAB either for enlistment purposes or as a student under the ASVAB testing program.			<input type="checkbox"/> b. I was tested with the ASVAB on or about _____ at _____ <i>(Most Recent Date Tested) (School, City, and State)</i>														
<input type="checkbox"/> c. Request for student test scores (high school look-up) _____ at _____ <i>(Most Recent Date Tested) (School, City, and State)</i>			<input type="checkbox"/> d. Yes, I want to keep my AFQT scores from the student test listed in "c" above.														
<input type="checkbox"/> e. Current or last high school attended _____ / _____ <i>(High School) OR (13 Digit Code)</i>			<input type="checkbox"/> f. _____ / _____ / _____ <i>(Signature of Applicant) (Social Security Number) (Date)</i>														
MEDICAL RECORDS RELEASE AUTHORITY: I request and authorize individuals/organizations listed below to release to the MEPS a complete transcript of my medical records. This release is for the purpose of further evaluation of my medical acceptability under military medical fitness standards. The medical records are to be obtained by this examinee at no cost to the Government and made available for review during the pre-enlistment physical.																	
27. APPLICANT'S CURRENT MEDICAL PROVIDER NAME <i>(If none, sign your complete name to affirm you have no current medical provider):</i>			28. MEDICAL INSURER ADDRESS <i>(Street, City, State, Country, ZIP Code)</i>														
29. MEDICAL PROVIDER ADDRESS <i>(Street, City, State, Country, ZIP Code)</i>			30. CERTIFICATION BY RECRUITING PERSONNEL I certify that I have properly identified this applicant in accordance with my service directives, have reviewed for completeness and accuracy the information provided on this form, and have witnessed the applicant's signature:														
_____ <i>(Signature of Recruiter (or rep, if auth))</i>		_____ <i>(Printed/Typed Name of Recruiter or Rep)</i>		_____ <i>(Date)</i>													
_____ <i>(Printed/Typed Name of Recruiter (if not recorded above))</i>																	
_____ <i>(Recruiter ID/SSN)</i>		_____ <i>(Local Recruiting Activity)</i>		_____ <i>(Bn, NRD, Sq or RS Location)</i>													
APPLICANT SSN																	

**Instructions for Completing
USMEPCOM 680-3A-E, Request For Examination
(Overseas Only)**

Procedures for Completing the USMEPCOM Form 680-3A-E

1. General. The USMEPCOM Form 680-3A-E is the first document completed on any applicant processing for the Armed Forces. It is the most important document, as it establishes the initial individual personal data in MIRS. It is essential that all data blocks on the 680-3A-E be accurate, fully completed (in blue, black, or blue/black ink only, and as legible as possible and the applicant sign their legal signature (Usually the way they sign a check or as indicated on an ID, for example: *John H. Hones*). All, HQ MOP-AD will approve Recruiting Services automated versions of the 680-3A-E.

2. Procedures

a. Item A - SERVICE PROCESSING FOR (SPF)

(1) Services: Enter the specific Service/component for which the individual is processing (i.e., Regular Army, Army National Guard, Regular Air Force, Air Force Reserve, Air National Guard, etc.).

(2) MEPS: Enter the appropriate three-position DOD Service/component code in the shaded area. Following are the authorized codes to be used:

Authorized SPF Codes

<u>CODE</u>	<u>SERVICE/COMPONENT</u>
DAR	Army Regular
DAV	Army Reserve
DAG	Army Guard
DNR	Navy Regular
DNV	Navy Reserve
DFR	Air Force Regular
DFV	Air Force Reserve
DFG	Air Force Guard
DMR	Marine Corps Regular
DMV	Marine Corps Reserve
GPR	Coast Guard Regular
GPV	Coast Guard Reserve
DAZ	Army Nonapplicants
DNZ	Navy Nonapplicants
DFZ	Air Force Nonapplicants
DMZ	Marine Corps Nonapplicants
GPZ	Coast Guard Nonapplicants
CMZ	Merchant Marines
EXZ	Central Intelligence Agency (CIA)
FDZ	Federal Bureau of Investigation (FBI)

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FHZ	Federal Marshals
GEZ	Federal Aviation Administration (FAA)
KLZ	Bureau of Land Management
MVZ	Volunteers in Service to America (VISTA)
	Volunteers in National Civilian Community Corps (NCCC)
QLZ	U.S. Customs Service
QSZ	Secret Service
SVZ	State Department (Peace Corps, etc.)
UKZ	Civil Service (Department of Defense Dependent School (DODDS), DA Civilians, Federal Protective Service, Civilian Reserve Officer Training Corps (ROTC) Instructors)
ZPZ	Public Health Service
ZZZ	Other (USMEPCOM use only)

b. Item B - PRIOR SERVICE

(1) **Services:** Enter an "X" in either the "YES" or "NO" block, based on input from the applicant and the respective recruiting Service definition of "Prior Military Service (PMS)."

(2) **MEPS:** Enter a "Y" for "Yes" or "N" for "No" as indicated by the Services in MIRS.

(3) **Number of Days:** Services – If item B is "YES", enter the number of active duty days (must enter at least 1 day of prior service). MEPS will verify the Service's entry to ensure compliance with instructions.

c. Item C - SELECTIVE SERVICE CLASSIFICATION. Leave blank, unless directed by HQ USMEPCOM. Information will be entered by the MEPS in this item only during mobilization or induction.

d. Item D – SELECTIVE SERVICE REGISTRATION NUMBER. Leave blank, unless directed by HQ USMEPCOM. Information will be entered by the MEPS in this item only during mobilization or induction.

e. Item 1 - SOCIAL SECURITY NUMBER (SSN)

(1) **Services:** Enter the applicant's SSN (nine numeric characters).

(2) **MEPS:** Verify the SSN agrees with the SSN as entered in USMEPCOM Form 680-3A-E, item 25f.

f. Item 2 – NAME (Last, First, Middle Name (and Maiden, if any), Jr., Sr., etc)

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(1) Services: Enter the complete full legal name of the applicant (maximum of 61 letter; 25 for last name, 15 for first name, 15 for middle name, and 6 for suffix) in capital letters, allowing one space between the last, first, middle names, and suffix, etc. A middle initial may not be used in lieu of the middle name, nor will nicknames be used (i.e., Jeff versus Jeffrey, Bill for William, etc.)

(2) MEPS: Verify the service's entry to ensure compliance with instructions outlined for item 2 (a) above.

g. Item 3 - CURRENT ADDRESS

(1) Services: Enter the street, city, county, State, Country, and ZIP-code+4 claimed as "CURRENT ADDRESS" as of the date of application.

(2) MEPS: Place the ZIP-code+4 in the ten-position shaded area. (If the last four numbers of the ZIP code are unknown, leave the last four positions in the ten-position shaded area blank.) In the next five-position shaded area, enter the five digit code for state and county code (two-position numeric state code and the three- position numeric county code). Enter the two-digit alphabetic country code in the last shaded area. (If the address is a foreign country, enter the ZIP-code+4, if applicable, or all zeros and enter the two-digit alphabetic country code.) State, county, and country codes are listed in USMEPCOM Reg 25-5 (Data Element Dictionary), appendix C.

h. Item 4 - HOME OF RECORD ADDRESS

(1) Services: If different than item 3 (current address), enter the street, city, county, State, country, and ZIP-code+4 claimed as the "HOME OF RECORD (HOR)." If the applicant's HOR address is the same as the current address, then enter in item 4 "Same as item 3" or enter the same address.

(2) MEPS: If the applicant's HOR address is the same as the current address, no coding is required in this area. If the HOR is different than item 3, follow the coding procedures outlined for item 4(a) above.

i. Item 5 - CITIZENSHIP

(1) Services: Enter an "X" in the appropriate item which best represents the citizenship status of the applicant.

(2) MEPS: Enter the two-position code in the shaded areas which corresponds to the item which was marked by the Service. The codes identify the status of an applicant with respect to U.S. citizenship and how that citizenship was acquired. The data elements contain U.S. citizenship status and origin of U.S. citizenship status, respectively, (e.g., a U.S. citizen who is

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native-born would be coded "CA"; a U.S. citizen whose origin is derivative at birth would be coded "CC").

(3) Citizenship codes. The following codes will be used to determine the applicant's U.S. citizenship status as entered by the Services/applicant:

Citizenship Codes

<u>DATA ITEM NAME</u>	<u>CODE</u>	<u>EXPLANATION</u>
U.S. Citizen	C	A person who is a citizen of the U.S. by birth or naturalization.
U.S. National (Non-U.S. Citizen)	A	A person who, though not a citizen of the U.S., owes permanent allegiance to the U.S. The law declares to be nationals, but not citizens of the U.S., persons born in American Samoa or Swains Island on or after formal acquisition of such possessions; or parents, both of whom are nationals, but not citizens of the U.S., who have had a residence in the U.S. or one of its outlying possessions prior to the birth of such person.
Non-U.S. Citizen	N	A person who is not a citizen of the U.S.
Unknown	Z	Citizenship status not determined.

NOTE: For applicants placing an "X" in item 5d or 5e on the USMEPCOM Form 680-3A-E, the code in all cases will be MIRS-coded "N" in this first position.

(4) Statutory origin. The following codes will be used to determine the applicant's U.S. citizenship (statutory) origin as entered by the Services/applicant:

Citizenship Origin Codes

<u>DATA ITEM NAME</u>	<u>CODE</u>	<u>EXPLANATION</u>
Native Born	A	A person born in the U.S. and subject to U.S. jurisdiction. The term "United States" means the

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continental U.S., Alaska, Hawaii, Puerto Rico, Guam, and the Virgin Islands of the U.S.

Derivative-Naturalization	B	A person who acquires U.S. citizenship after birth through naturalization of one or both parents.
Derivative-Birth	C	A person who acquires U.S. citizenship at birth outside the U.S. of parents, one or both of whom are U.S. citizens, at the time of the person's birth.
Naturalization	D	A person born outside the U.S. who has completed naturalization procedures and has been admitted to the U.S.
Not Applicable	Y	Not a U.S. citizen.
Unknown	Z	Origin not determined.

NOTE: For applicants placing an "X" in item 5c, 5d, and 5e on the USMEPCOM Form 680-3A-E, the code in all cases will be MIRS-coded "Y" in this position.

(5) Alien Registration Number (Block 5f).

(a) Services: Enter the applicant's Alien Registration Number.

(b) MEPS: Enter into MIRS the information entered by the Services.

j. Item 6 - SEX

(1) Services: Enter an "X" in the appropriate block.

(2) MEPS: Enter in the one-position shaded area an "M" for male or "F" for female, or "Z" for unknown.

k. Item 7.a. – RACIAL CATEGORY

(1) Services: Enter an "X" in the appropriate block(s).

(2) MEPS: Enter an "X" in the appropriate block(s) as submitted by the services and use the racial category conversion codes as listed in the tables below.

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Racial Category (Election Table)

- AMERICAN INDIAN/ALASKA NATIVE
- ASIAN
- BLACK OR AFRICAN AMERICAN
- NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
- WHITE
- DECLINE TO RESPOND (Use this block if form not completed for Racial Category)

Racial Category Conversion Table (per selections in Election Table above)

Code Explanation

A	American Indian/Alaska Native
B	Asian
C	Black or African American
D	Native Hawaiian or other Pacific Islander
E	White
F	Decline to respond
G	Identification Pending
H	American Indian/Alaska Native, Asian
J	American Indian/Alaska Native, Asian, Black or African American
K	American Indian/Alaska Native, Asian, Black or African American, Native Hawaiian or other Pacific Islander
L	American Indian/Alaska Native, Asian, Black or African American, Native Hawaiian or other Pacific Islander, White
M	American Indian/Alaska Native, Asian, Black or African American, White
N	American Indian/Alaska Native, Asian, Native Hawaiian or other Pacific Islander
P	American Indian/Alaska Native, Asian, Native Hawaiian or other Pacific Islander, White
Q	American Indian/Alaska Native, Asian, White
R	American Indian/Alaska Native, Black or African American
S	American Indian/Alaska Native, Black or African American, Native Hawaiian or other Pacific Islander
T	American Indian/Alaska Native, Black or African American, Native Hawaiian or other Pacific Islander, White
U	American Indian/Alaska Native, Black or African American, White
V	American Indian/Alaska Native, Native Hawaiian or other Pacific Islander
W	American Indian/Alaska Native, Native Hawaiian or other Pacific Islander, White
X	American Indian/Alaska Native, White
Y	Asian, Black or African American
Z	Asian, Black or African American, Native Hawaiian or other Pacific Islander
1	Asian, Black or African American, Native Hawaiian or other Pacific Islander, White
2	Asian, Black or African American, White
3	Asian, Native Hawaiian or other Pacific Islander
4	Asian, Native Hawaiian or other Pacific Islander, White
5	Asian, White

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- 6 Black or African American, Native Hawaiian or other Pacific Islander
- 7 Black or African American, Native Hawaiian or other Pacific Islander, White
- 8 Black or African American, White
- 9 Native Hawaiian or other Pacific Islander, White

l. Item 7.b. - ETHNIC CATEGORY

(1) Services: Enter an “X” in either the “(1) HISPANIC OR LATINO (2) NOT HISPANIC OR LATINO items based on applicant’s Ethnic Category election.

(2) MEPS: Enter the appropriate ethnic category code that corresponds to the selection as submitted by the Services. If the block is not completed, in MIRS use Declined to Respond. MEPS will verify the Service’s entry to ensure compliance with instructions.

m. Item 8 - MARITAL STATUS

(1) Services: Enter the legal status of the applicant as it relates to marriage using one of the following marital status codes in (b) below.

(2) MEPS: Enter the one-position alphabetic code in the shaded area from the following, which best corresponds to the marital status as entered by the Services/applicant:

Marital Status Codes

<u>MARITAL STATUS</u>	<u>CODE</u>	<u>EXPLANATION</u>
Annulled	A	The status of an individual whose marriage has been declared a nullity.
Divorced	D	The status of an individual who has had a marriage legally dissolved.
Interlocutory	I	The status of an individual during a period covered by an inter-locutory decree pending final divorce.
Legally Separated	L	The status of an individual who has been separated from the spouse by legal action without a decree of divorce.
Married	M	The status of an individual, excluding one legally separated,

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		who has entered into a legal marriage. Includes common-law marriage.
Single	S	The status of an individual who has never been married.
Widowed	W	The status of an individual whose spouse had been declared legally dead.

n. Item 9 - NUMBER OF DEPENDENTS

(1) **Services:** Enter the number of individuals who are totally or partially dependent on the applicant for support.

(2) **MEPS:** Enter the two-position numeric dependent code in the shaded area. Applicant's with one to nine dependents will be coded with a zero before the number (e.g., "01," "04," "09"). Applicants with 10 or more dependents will be coded with the appropriate 2-digit number.

o. Item 10 - DATE OF BIRTH (DOB)

(1) **Services:** Enter the applicant's DOB in YYYYMMDD (year-month-day) format (e.g., 19760323). Applicants below the age of 17 are not eligible for enlistment processing; therefore, will not be given an ASVAB enlistment test and/or a medical examination. Scores will be invalidated for applicants who had taken the enlistment ASVAB test and were under the age of 17. Normal retest policy applies. This age policy does not effect student ASVAB testing. Students can be tested at the age of 16 and later, at age 17 or greater, use these test scores for enlistment processing when eligible up to 2 years. Applicants that are both 16 years of age and sophomores at the time of test cannot use the test for enlistment purposes.

(2) **MEPS:** Verify the DOB format to ensure it is entered as YYYYMMDD and that the applicant is eligible for enlistment processing.

p. Item 11 - RELIGIOUS PREFERENCE

(1) **Services:** Enter the applicant's religious preference IAW appropriate Service directives.

(2) **MEPS:** Enter the two-position alphanumeric religious preference code in the shaded area. Religious denominations and corresponding codes are listed in MIRS.

q. Item 12 – EDUCATION. This data item contains the Education Level that is the amount of education that an individual has received and the certificate that was granted for that

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education. The first two positions (Years) identify the number of formal academic years of education an individual has successfully completed. The third position (Highest Grade Completed) identifies the recognition given as a result of those years of formal education completed; the highest educational level or status attained by an individual.

(1) **Services:** Enter the number of years of formal education successfully completed and the highest grade of formal education completed. Codes for educational certification level are contained in item 12(b) below.

(2) **MEPS:** Verify the entry, as entered by the Services, to ensure compliance with the following DOD standard codes and enter the correct code in the shaded area.

Education Codes

<u>DATA ITEM NAME</u>	<u>CODE</u>	<u>EXPLANATION</u>
Currently in High School	9	Status of an individual who is currently in high school and is not yet a high school senior.
High School Senior	S	Status of an individual who is currently attending high school and is a high school senior.
High School Diploma	L	A diploma issued to an individual who has attended and completed a 12-year or grade day program of classroom instruction; the diploma must be issued from the school where the individual completed all the program requirements.
Less than High School Diploma	1	Status of an individual who is not currently attending high school and who is neither a high school graduate or an alternate high school credential holder.
Credential Near Completion	M	Status of an individual who is currently pursuing completion of one of the credentials listed below.

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Test-based Equivalency	E	A diploma or certificate of general development (GED) or other Diploma test-based high school equivalency diploma. This includes Statewide testing programs such as the California High School Proficiency Examination (CHSPE), where-by examinees earn a certificate of competency or proficiency. A State or locally issued secondary school diploma obtained solely on the basis of such equivalency testing is not to be considered a high school diploma. This is considered an alternate high school credential.
Occupational Program Certificate of Attendance	C	A noncorrespondence vocational, technical, or proprietary school for at least 6 months. An individual so coded must also have completed 11 years of regular day school. This is considered an alternate high school credential.
Correspondence School Diploma	7	A secondary school diploma or certificate awarded upon completion of correspondence school course work, regardless of whether the diploma was issued by a correspondence school, a State, or a secondary or post-secondary educational institution. This is considered an alternate high school credential.
Home Study Diploma	H	A secondary school diploma or certificate, typically awarded by a State, based upon certification by a parent or guardian that an individual completed their secondary education at home. This is considered an alternate high school credential.

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Adult Education Diploma	B	A secondary school diploma on the basis of attending and completing an adult education or "External" diploma program, regardless of whether the diploma was issued by a State or by a secondary or post-secondary educational institution.
Other Non-Traditional School Credential	5	A secondary school credential High issued for completing an alternative school/program that differs in course content and curriculum from traditional high school diploma program. Schools/programs that are accelerated and issue a diploma based on a combination of testing, independent study, adult basic education (ABE) and/or competencies are classified as Tier 2, regardless of whether the credential was issued by a secondary or post-secondary institution.
High School Certificate of Attendance	J	An attendance-based certificate or diploma. These are sometimes called certificates of competency or completion, but are based on course completion rather than a test such as the "GED" or "CHSPE." A State or locally issued secondary school diploma obtained solely on the basis of an attendance credential is not considered a high school diploma. This is considered an alternate high school credential.
Completed one Semester of College	8	The status of an individual who is a high school nongraduate or attended a college or university, and completed at least 15 semester or 20 quarter-hours of college-level credit. Credit earned

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		through testing, for pursuit of adult education, or for high school equivalency preparation is not applicable.
Associate Degree	D	A certificate conferred upon completion of a 2-year program at a junior college, university, or technical institute.
Professional Nursing hospital	G	A certificate conferred upon completion of a 3-year school or nursing program.
Baccalaureate Degree	K	A certificate conferred upon completion of a 4-year college program, other than a first professional degree.
First Professional Degree	W	A certificate conferred upon completion of the academic requirement for the first degrees awarded in selected professions: Architecture, Certified Public Accountant, Chiropody or Podiatry (D.S.C. or POD.D), Dentistry (D.D.S. or D.M.D.), Medicine (M.D.), Optometry (O.D.), Osteopathy (D.O.), Pharmacy, Veterinary Medicine, Law (L.L.B. or J.D.), and Theology (B.D., Rabbi, or other first professional degree).
Master's Degree	N	A certificate conferred upon completion of additional academic requirements beyond the baccalaureate or first professional degree but below the doctorate level.
PostMaster's Degree	R	A certificate conferred upon completion of additional

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		academic requirements beyond the master's degree level but below the doctor-rate level.
Doctorate Degree	U	A certificate conferred in recognition of the highest academic achievement within an academic field, excluding honorary degrees and first professional degrees.
	F	Completed high school, did not pass high school exit exam
	X	GED-National Guard Challenge Program

r. Item 13 – PROFICIENT IN FOREIGN LANGUAGE. If yes, **Services/MEPS** enter two-digit code for specified language. If no, **Services** print “NONE” in the space before the blocks. **MEPS** leave blank.

s. Item 14 – VALID DRIVER’S LICENSE

(1) Services: If yes, Enter applicant’s valid driver’s license number (list state, number, and expiration date). Leave blank, if applicant does not possess a valid driver’s license.

(2) MEPS: Enter into MIRS the information provided by the Services.

t. Item 15 – PLACE OF BIRTH

(1) Services: Enter applicant’s place of birth (city, state, country)

(2) MEPS: Enter into MIRS the information provided by the Services.

u. Item 16 – APTITUDE. This information is only required when a 680-3A-E is submitted for initial and/or subsequent tests.

(1) Services: Indicate whether a qualifying ASVAB test score is/is not required for enlistment and the type of aptitude processing required for the applicant to enlist/process.

(a) Item 16a (ASVAB Required to Enlist?). The Services will enter an “X” in the “YES” or “NO” data item based upon whether a qualifying ASVAB test score is/is not required for enlistment. NOTE: “YES” must be selected if a qualifying ASVAB test score is required for the applicant to enlist.

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(b) Item 16b (Enlist Under Student Test Scores?). The Services will enter “X” in the “YES” data item if the applicant will be enlisting on his/her student ASVAB test score.

(c) Item 16c (Test Type). If “YES” is selected in item 16a, the Services will enter an “X” in the appropriate data item to specify the type of aptitude processing that the applicant requires for enlistment/processing.

- **Initial.** The Services will enter “X” if the applicant is required to take an initial enlistment ASVAB test.

- **Special.** The Services will enter “X” if the applicant is required to take a special test.

- **Confirmation.** The Services will enter “X” if the applicant is required to take a confirmation ASVAB test.

(d) Item 16d (Retest). If the applicant is going to take an ASVAB retest, the Services will enter “X” in the appropriate data item to select the type of aptitude retest processing (**USMEPCOM Regulation 611-1 provides specific date eligible guidance**).

- **1st Retest.** The Services will enter “X” if the applicant is taking a 1-month retest (**retesting 1 month after initial test (based on calendar days)**).

- **2nd Retest.** The Services will enter “X” if the applicant is taking a retest 1-month (**retesting 1 month after 1st Retest (based on calendar days)**).

- **Immediate Retest Authorized.** The Services will enter “X” if the MEPS Commander has authorized an immediate retest using a different ASVAB version.

- **6 Month Test.** The Services will enter “X” if the applicant is taking a 6-month retest (**retesting 6 months after the 2nd Retest (based on calendar days)**).

(e) Item 16e (Previous Test Version). The Services will enter the ASVAB test version of the applicant’s previous test taken. Authorized test versions are listed in USMEPCOM Reg 25-5, appendix C.

(f) Item 16.f. (Previous Test Date (YYYYMMDD)). The Services will enter the date that the applicant took the previous ASVAB test version. The date must be valid and in YYYYMMDD format.

(2) MEPS: Enter into MIRS the information entered by the Services, ensure valid aptitude processing is provided.

v. Item 17 - RECRUITER ID/SSN/STN ID

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(1) Services: Enter recruiter ID/SSN (nine alphanumeric characters - if less than nine alphanumeric characters, left zero fill) and recruiting station ID (five alphanumeric characters). The recruiter ID/SSN in this item does not have to match the certification.

NOTE: Army National Guard recruiters will use a special ID/SSN code for processing, which is broken down as follows: the first two digits equate to the State numeric code (AL = "01," SD = "46," etc.); the next three digits equate to the recruiter's station ID code; and the last four digits equate to the last four digits of the recruiter's SSN.

(2) MEPS: Verify the Service's entry to ensure compliance with the above instructions. If recruiter ID/SSN is not applicable or not provided, enter nine 9's or leave blank. If recruiting station ID is not applicable or not provided, leave blank.

w. Item 18 - TEST ADMINISTRATOR (TA) SSN/ID

(1) Services: No entry required for Services.

(2) MEPS: TA conducting testing will enter his or her ID (if less than nine numeric characters, left zero fill).

x. Item 19 - TEST ADMINISTRATOR SIGNATURE

(1) Services: No entry required for Services.

(2) MEPS: TA conducting the test will sign his or her name.

y. Item 20 – MEDICAL. This information is only required when a 680-3A-E is submitted for initial and or subsequent tests:

(1) Services: The Services will indicate whether a medical examination is/is not required for enlistment and the type of medical processing required for the applicant to enlist/process.

(a) Item 20.a. (MEPS Medical Exam Required to Enlist?). The Services will enter "X" in the "YES" or "NO" data item based upon whether a medical examination is/is not required for enlistment. NOTE: "YES" must be selected if a medical examination is required for the applicant to enlist.

(b) Item 20.b. (Exam Type). If "YES" is selected, the Services will enter "X" in the appropriate data item to specify the type of medical processing that the applicant requires for enlistment/processing.

- Full Physical. The Services will enter "X" if the applicant is required to undergo a full medical examination.

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- **Inspection.** The Services will enter “X” if the applicant is required to undergo an inspection medical examination.

- **Special.** The Services will enter “X” if the individual is required to undergo a full physical medical examination and included in that examination is special medical processing (i.e., quadrennial over 40 physical, individual ready reserve (IRR), health care professional, electrocardiogram (EKG), etc.).

- **Consult.** The Services will enter “X” if the applicant is required to undergo a consult examination (i.e., orthopedic, psychiatric, ear lavage, etc.).

- **Re-exam.** The Service will enter “X” if the applicant is required to undergo some form of medical re-examination.

- **Other.** The Services will enter “X” if the applicant is required to undergo some other form of medical processing (i.e., drug and alcohol (DAT) only, Human Immunodeficiency Virus (HIV) only, etc.).

(c) **Item 20.c. (Date Last Full Medical Exam (YYYYMMDD)).** The Services will enter the date that the applicant took the last MEPS full medical examination. The date must be valid and in YYYYMMDD format.

(2) **MEPS:** The MEPS will verify/enter into MIRS the information provided by the Services to ensure appropriate medical processing is performed.

z. Item 21 – Applicant’s Signature.

(1) **Services:** No entry required for Services.

(2) **MEPS:** Applicant tested will sign their legal signature, see “1 General” for definition. Perform a signature verification check.

aa. Item 22 - MIRS CODING

(1) **Services:** No entry required for Services.

(2) **MEPS:** There is not a requirement to enter the MIRS first WKID of A000V on initial aptitude or medical records in attending or if not attending high school, the name of the high school last attended. Completion of this item is optional; however, the Service’s ability to perform marketing analysis is hindered without this information.

(a) **Testing processing.** Enter the MIRS aptitude WKID and status code (i.e., B100, B200, B800, etc.), date the test was administered, initials of the individual who keystroked the entry, date the files check was conducted, and initials of the individual who conducted the files check.

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(b) Medical Processing. When the USMEPCOM Form 680-3A-E is used for initial medical processing and aptitude processing is not required, medical will enter the medical WKID and status code (i.e., B010, B020, B030, etc.), date the medical examination was administered, initials of the individual who keystroked the entry, date the files check was conducted, and initials of the individual who conducted the files check.

bb. Item 23 - APPLICANT CERTIFICATION IN PRESENCE OF TA.

(1) Services: No entry required for Services.

(2) MEPS: The TA will verify the applicant's identity by presentation of a photo ID. The TA will enter "X" in "YES" or "NO" whether a photo ID was presented, the type of photo ID (i.e., drivers license, student ID card, passport, etc.), the photo ID number, and organization from which the ID came.

(3) Applicant: The applicant will certify their identity by signing their legal signature, see "1 General" for definition.

cc. Item 24 – RIGHT THUMB PRINT. If a photo ID is not presented, the photo ID is invalid (expired, etc), or the TA is unable to verify the identity of the applicant from the photo ID presented (i.e., applicant's physical appearance does not match photo ID, photo ID information does not match other document information, etc.), the TA will put the applicant's right thumbprint in the first attempt block. Unsuccessful thumbprint will be repeated by turning the USMEPCOM Form 680-3A-E over (top of form on the bottom) and affixing right thumbprint on the upper right corner, thumbnail pointed to the left.

dd. Item 25 - APPLICANT CERTIFICATION IN PRESENCE OF RECRUITING PERSONNEL. The information in items 25(a), (b), and (c) are only required when a 680-3A-E is submitted for initial and/or subsequent tests. The applicant must indicate if they have ever had a prior ASVAB test for any Service, to include the ASVAB Student test, and if so, when and where. By signature, the applicant attests to this and to the personal data shown. False certification could result in the examination being invalidated or a delay in their processing.

(1) Services:

(a) Item 25.a. The Services will enter an "X" if the applicant has never been tested under the enlistment or student ASVAB program.

(b) Item 25.b. The Services will enter an "X" if the applicant has tested under the enlistment or student ASVAB program and will indicate the most recent date tested and the place the applicant took the ASVAB test. The date must be valid and in YYYYMMDD format.

(c) Item 25.c. Request for student test scores (high school look-up). The Services will enter an "X" if requesting a high school look-up, indicate the most recent date tested, and

**Instructions for Completing
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(Overseas Only)**

the place the applicant took the high school test. The date must be valid and in YYYYMMDD format.

(d) Item 25.d. The Services will enter and “X” if the applicant desires to keep AFQT scores from the student test listed in item **25c** above.

(e) Item 25.e. Name of high school currently attending (if applicable) or last high school attended. The Services will enter the name of the applicant’s current or last high school attended. Completion of this item is optional; however, the Services’ ability to perform marketing analysis is hindered without this information. The Services will enter the 13-digit code for the current or last high school attended **in accordance with DOD data element standard**.

(f) Item 25.f. The applicant will certify their identity by signing their legal signature. The applicant will also enter their SSN and date the form.

(2) MEPS: The MEPS will verify the information provided by the Service to ensure appropriate aptitude processing is performed.

ee. Item 26 – APPLICANT’S CURRENT MEDICAL INSURER NAME. (If none, sign your complete name to affirm that you have no current medical insurer):

(1) Services: The Services will enter the name of the applicant’s current medical insurance company. If none, the applicant will sign their legal signature to affirm that they have no current medical insurer. (NOTE: MIRS data entry is NONE).

(2) MEPS: Verify the Service’s entry to ensure compliance with instructions for item 26(a) above.

ff. Item 27 – APPLICANT’S CURRENT MEDICAL PROVIDER NAME. (If none, sign your complete name to affirm that you have no current medical provider):

(1) Services: Enter the name of the applicant’s current medical provider (primary physician or hospital); if none, the applicant will sign their legal signature to affirm that they have no current medical provider (NOTE: MIRS data entry is NONE).

(2) MEPS: Verify the Service’s entry to ensure compliance with instructions for item 27(a) above.

gg. Item 28 – MEDICAL INSURER ADDRESS (Street, City, State, Country, ZIP Code, Can be blank if Item 26 is “None” (No medical insurer)).

(1) Services: A complete address is requested; however, understanding that a fully complete address might not be available or remembered by the applicant, enter as much of the address as possible and leave blank the other items for completion when the missing information

**Instructions for Completing
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(Overseas Only)**

is known (NOTE: MIRS data entry work around for address portions that are not provided are as follows – Street: “UNKNOWN”, City: “UNKNOWN”, State: “MEPS state code”, ZIP code “MEPS ZIP Code”, Country is system pre-filled).

(2) **MEPS:** Verify the Service’s entry to ensure compliance with instructions for item 28(a) above.

hh. Item 29 – MEDICAL PROVIDER ADDRESS (Street, City, State, Country, ZIP Code, Can be blank if Item 27 is “None” (No medical provider)).

(1) **Services:** A complete address is requested; however, understanding that a fully complete address might not be available or remembered by the applicant, enter as much of the address as possible and leave blank the other items for completion when the missing information is known (NOTE: MIRS data entry work around for address portions that are not provided are as follows: Street: “UNKNOWN”; City: “UNKNOWN”; State: “MEPS state code”; ZIP Code “MEPS ZIP Code”; country is system pre-filled.

(2) **MEPS:** Verify the Services entry to ensure compliance with instructions for item 29(a) above.

ii. Item 30 - CERTIFICATION BY RECRUITING PERSONNEL.

(1) **Services:** Authorized-recruiting personnel must sign and attest to the accuracy of the information provided by the applicant IAW Service directives. Whether or not recruiting personnel must witness the applicant's signature is specified by respective recruiting policy. False certifications will be forwarded to the appropriate Service counselor/liaison for disposition, which could delay processing. Further, if it is subsequently disclosed that applicants were administered an unauthorized retest or an incorrect test version due to inaccurate data contained on the completed USMEPCOM Form 680-3A-E, the test will be invalidated.

(2) **MEPS:** Verify the Service’s entry to ensure compliance with instruction for item 30(a) above.

Attachment 4

**USMEPCOM Form 611-1-2-R-E
Unverified Test Scores, with instructions**

UNVERIFIED TEST SCORES (SINGLE APPLICANT)
For use of this form, see USMEPCOM Reg 611-1

FOR OFFICIAL USE ONLY

FOR TA USE ONLY

Name					SSN				
Date of Test			Test Version			MET Site			
Service	AR	NA	AF	MC	CG	Component	Active	Reserves	National Guard

Enter the percentile score:

--

AFQT Percentile

**Instructions for completing
USMEPCOM Form 611-1-2-R-E, Unverified Test Scores
(Overseas Only)**

Use this form to record the AFQT result from the Personal Digital Assistant (PDA). Per USMEPCOM Regulation 611-1, paragraph 3-8h(5) Score tests and generate a USMEPCOM Form 611-1-2-R-E (Unverified Test Scores (Single Applicant)) for those applicants that provided an envelope. The form must be sealed in the envelope before release to the applicant. Instruct the applicant to deliver the sealed envelope to their recruiter.”

The unverified score will be provided to the recruiter not later than 2 working days after the test has been administered. The primary means of passing AFQT scores to the recruiter is via the envelope provided by the recruiter. In the absence of an envelope and due to the nature of distances the recruiter covers in overseas areas, the recruiter is responsible for providing the test administrator his or her e-mail address, mailing address, etc. for the forwarding of unverified test results.

Testing personnel are not to reveal the score to the applicant. Recruiters are responsible for any scoring interpretations.

Item “Name” – Enter applicant’s name.

Item “SSN” - Applicant’s social security number.

Item “Date of test” - Self-explanatory.

Item “Test version” - Enter test version located on test booklet which the applicant takes.

Item “MET Site” - Enter test site code provided by your supporting MEPS. If you are not sure what your MET Site code is contact your supporting MEPS (Honolulu or New York).

Item “Service” - Circle the Service that the applicant is testing for: AR=Army, NA= Navy, AF=Air Force, MC=Marine Corps and CG=Coast Guard.

Item “Component” – Circle the component of Service that the applicant is testing for.

Item “AFQT Percentile” – In this box enter the score produced by the PDA’s AFQT Calculator.

Attachment 5

**USMEPCOM Form 611-1-7-R-E
Aptitude Testing Processing List, with instructions**

APTITUDE TESTING PROCESSING LIST

(For use of this form, see USMEPCOM Reg 611-1-1)

FOR OFFICIAL USE ONLY

a. Test Site/MEP Site Code	b. Test Administrator				c. Date
d. Name (Last, First, Middle)	e. SSN (Last Four)	f. Version Number	g. Service	h. Sex	i. Remarks
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					

**Instructions for completing
USMEPCOM Form 611-1-7-R-E Aptitude Testing Processing List
(Overseas Only)**

Use this form to create a roster of applicants testing in each enlistment test session. The MEPS TCO will review the form to ensure no unusual test version patterns are developed. Instructions for completing the form are as follows:

Item 1 – TEST SITE – Enter your test site identification number assigned by your supporting MEPS. If you do not know your Test Site id#, contact your supporting MEPS (contact information in attachment 2).

Supported by the New York MEPS				
MET ID	COUNTRY	LOCATION	ORG OR UNIT	SERVICE
8801	BELGIUM	SHAPE	Shape Education Center	USA
8810	ENGLAND	RAF Mildenhall	100TH MSS/DPMPE	USAF
8811	ENGLAND	RAF Lakenheath	48TH MSS/DPMPE	USAF
8812	ENGLAND	Menwith Hill Station	PSC 45 Menwith Hill Station	USA
8813	ENGLAND	LONDON	PSD LONDON	USN
8806	EUROPE	Livorno AEC	Area Support Team (Ed Ctr)	USA
8802	GERMANY	Wiesbaden	221ST BSB (Ed Ctr)	USA
8803	GERMANY	Miesau AEC	415 BSB (Ed Ctr)	USA
8814	GERMANY	Vilsek AEC	409TH BSB (Ed Ctr)	USA
8816	GERMANY	Dexheim AEC	221ST BSB (Ed Ctr)	USA
8817	GERMANY	Giessen Army Depot AEC	Giessen Ed Ctr	USA
8818	GERMANY	Friedberg AEC	Friedberg Ed Ctr	USA
8819	GERMANY	Darmstadt AEC	Darmstadt Ed Ctr	USA
8822	GERMANY	Larson AEC	Larson Ed Ctr	USA
8823	GERMANY	Bamberg AEC	279th BSB (Ed Ctr)	USA
8829	GERMANY	Sullivan Barracks AEC	293rd BSB (Ed Ctr)	USA
8832	GERMANY	Panzer Kaserne	Panzer Kaserne Ed Ctr	USA
8833	GERMANY	Hanau AEC	Pioneer Barracks Ed Ctr	USA
8842	GERMANY	Patton Barracks	Army Ed Ctr	USA
8843	GERMANY	Stuttgart	USAFE MSS/DPMPE	USAF
8852	GERMANY	Kleber AEC	415TH BSB, ED CTR	USA
8853	GERMANY	Spangdahlem AB	52D MSS/DPMPE	USAF
8862	GERMANY	Ansbach-Katterbach	Army Ed Ctr	USA
8863	GERMANY	Ramstein AB	86TH MSS/DPMP	USAF
8872	GERMANY	Baumholder AEC	222D BSB, ED CTR	USA
8882	GERMANY	Ledward AEC	280TH BSB, Ledward Ed Ctr	USA
8892	GERMANY	Hohenfels AEC	282ND BSB, Hohenfels Ed Ctr	USA
8804	ICELAND	Keflavik	85TH MSS/DPMP	USN
8805	ITALY	Aviano AB	31ST MSS/DPMPE	USAF

**Instructions for completing
USMEPCOM Form 611-1-7-R-E Aptitude Testing Processing List
(Overseas Only)**

Supported by the New York MEPS (cont)				
8815	ITALY	Naples	PSD Naples	USN
8825	ITALY	Sigonella	PSD	USN
8835	ITALY	Vicenza AEC	USASETAF/Vicenza Ed Ctr	USA
8807	PORTUGAL	Lajes Field	65TH MSS/DPMP	USAF
8808	SPAIN	ROTA	PSD ROTA	USN
8809	TURKEY	Incirlik AB	39TH MSS/DPMP	USAF

Supported by the Honolulu MEPS				
MET ID	COUNTRY	LOCATION	ORG OR UNIT	SERVICE
8821	JAPAN	Camp Zama	USA Garrison (Ed Ctr)	USA
8831	JAPAN	Okinawa	US Army Garrison	USA
8841	JAPAN	Misawa	35 MSS/DPMPE	USAF
8851	JAPAN	Yokota	374 MSS/DPMPE	USAF
8871	JAPAN	Sasebo	PSD Sasebo	USN
8881	JAPAN	Yokosuka	PSA PAC	USN
8883	JAPAN	Torii Station	Education Services Office	USA
8811	KOREA	Yongsan	KORO (K. Regional Office)	USA
8861	KOREA	Osan	51 MSS/DPMPE	USAF

Item 2 – TEST ADMINISTRATOR – Enter the test examiner’s name.

Item 3 - DATE – Enter the date test is administered.

Item 4 - NAME (Last, First Middle) – Enter the names of all applicants tested in that test session.

Item 5 – SSN (Last four) – Enter the last four digits of the applicant’s social security number.

Item 6 – VERSION NUMBER – Enter the enlistment test version number that each applicant took during this test session.

Item 7 - SERVICE – Enter the Service code from below which each applicant is testing for:

DAR = Army Regular	DAV = Army Reserve
DNR = Navy Regular	DNV = Navy Reserve
DFR = Air Force Regular	DFV = Air Force Reserve
DFG = Air Force Guard	

Item 8 - SEX – Enter Male or Female.

Item 9 – REMARKS - Enter any reason an applicant is dismissed from a test session, i.e. cheating, distress, disruption, etc. and note the time and reason of dismissal in this item column.

Attachment 6

**USMEPCOM Form 601-4-3-E
Student ASVAB Test Record, with instructions**

STUDENT ASVAB TEST RECORD

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

School Code: _____

School Year: _____

SECTION I - Scheduling Information

Test Session Number: _____

School: _____ Street Address: _____

School Contact: _____ City: _____ State: _____ Zip: _____

School Phone: _____ Ext _____ County: _____ Service Assigned: _____

E-mail: _____ Fax: _____ Service Open Season? _____ Testir _____

Test Option: _____

Split Option: _____

Test Option 2: _____

Scheduled Test Date: _____ Start Time: _____ Time Zone: _____

Students Scheduled: _____ 12th: _____ 11th: _____ 10th: _____ Other: _____ Total Scheduled: _____

Mandatory For: _____ 12th: _____ 11th: _____ 10th: _____ Other: _____ Total Proctors Required: _____

School Student Pop: _____ 12th: _____ 11th: _____ 10th: _____ Other: _____

Test Location: _____ Multiroom Test? _____ Break Requested? _____ Initial SY Exam? _____

Lapboards Required? _____ Initial Exam Ever? _____

Test Administrator Information

OPM Region Conductioning Test: _____ Alternate OPM Region: _____ Number OPM TAs Required _____

Military TAs Required? _____ Number Mil TAs Required: _____

Recruiter Information

Responsible Recruiter: _____ Phone: _____

E-mail: _____

Remarks

SECTION II - School Confirmation

Date Confirmation Letter Mailed: _____ Date school contacted to confirm test (5 days prior): _____

Dates TA/Proctor Support Confirmed: TA _____ Proctor _____

SECTION III - Test Session Data

Date Tested: _____ Number of Test Booklets Used: _____ Was Proctor Support Sat _____

Test Started On Time? _____

Number of Students Tested: 12th _____ 11th _____ 10th _____ Other _____ Total Tested _____

Remarks (Explain negative responses from above) _____

Proctor Certification: I certify that I have read and understand the ASVAB Proctor duties and responsibilities.

Arrival Time	Signature	Print Name	Print Rank/Grade	Print Service/Organization
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

1. Duties and Responsibilities:

- a. The role of the proctor is particularly important in the Student Testing Program. If the proctor does the job properly, much of the temptation to cheat is gone and the possibility of test loss/compromise is greatly reduced.
- b. The military proctor is a representative of the Department of Defense, the U.S. Armed Services, and his or her respective Service. The proctor is on display, and attitudes toward the military by those who observe the test situation are directly affected by the proctor's conduct. He or she must be a professional at all times.
- c. Regardless of rank, rate, or grade, each proctor must remember that he or she is responsible to the Test Administrator (TA), and while at the test site the TA is in charge of the test session.
- d. Proctors will not congregate in groups during the test session. Proctors will patrol their assigned areas continuously while directions are being read and while the test is being administered. Within the assigned areas, the proctors will:
 - (1) Assist in distributing and collecting test materials as directed by the TA. Opening test books and viewing test questions is prohibited.
 - (2) Ensure that all students in the assigned area have the required test materials prior to beginning the test and that unused test materials are returned to the TA for securing and that test booklets are inventoried, by serial number, before students are dismissed.
 - (3) Assist the TA in collecting test materials when the students are released for a school emergency or other unplanned event.
 - (4) Assist students with those sections of the answer forms which pertain to identification, address, and release agreement.
 - (5) Throughout the test session, ensure that the students:
 - (a) Throughout the test session, ensure that the students, work on the proper test subsection,
 - (b) Use the proper section on the answer sheet for each test subsection,
 - (c) Do not make pencil marks in the test booklet,
 - (d) Do not make stray marks on their answer sheets,
 - (e) Do not cheat (immediately report any incidents of cheating to the TA,)
 - (f) Do not distract or assist other students.
 - (g) Do not use calculators, cellular phones, cameras, electronic translators, or other mechanical devices during the test.
 - (6) Not in any way assist students in answering test questions. Student may ask questions, but must be told only to "REREAD THE QUESTION."
 - (7) Not become involved in extended discussions with anyone in the test room or otherwise disturb student concentration.
- e. Proctors will remain in the testing room during the entire test session.
- f. The proctor must remember that active recruiting is prohibited during the test session. He/she should let actions, attitude, and appearance do the the recruiting during the test session.
- g. The proctor feels that the TA or other proctor did not demonstrate ethical conduct or that the TA did not administer the test in a professional manner, the particulars should be relayed to the IRC chairman and the violator's Commanding Officer.

2. Your duties and responsibilities while proctoring play a vital part in determining the success of the Student Testing Program. You should approach them with a positive attitude.

3. Your MEPS Point of contact is:

Name _____

Phone _____

**Instructions for completing
USMEPCOM Form 601-4-3-E, Student ASVAB Test Record
(Overseas Only)**

USMEPCOM Form 601-4-3-E (Student ASVAB Test Record). Use this form to schedule student test sessions, coordinate administrative support, and record test session information. Assign this form the same session number recorded on USMEPCOM Form 601-4-2-R-E. Write the session number in the blank space at the top of the form. (Refer to par. 601-4, 5-2a(1) for information on assigning session numbers.) The TC will ensure the correct and complete preparation of this form, and will keep a completed form in the historical file of each testing school. Instructions for completing the form are as follows:

SECTION I - Scheduling Information – Completed by the STP software in the CONUS. If Section I is not completed by the software (OCONUS), complete manually. Most items are self-explanatory; items needing an explanation are:

School Code: Enter the USMIRS school code.

NEW YORK OVERSEAS SCHOOL LISTING					
SERVICE ASSIGNED	SCHOOL CODE	SCHOOL NAME	CITY	STATE	ZIP
AR	571004000	ANKARA AMERICAN HIGH SCHOOL	APO	NY	9254
AR	571004010	BRUSSELS AMERICAN HIGH	APO	NY	9667
AR	571004020	SHAPE AMERICAN HIGH SCHOOL	APO	NY	9088
AF	572005060	LONDON CENTRAL HIGH SCHOOL	APO	NY	9241
AR	572005061	MENWITH HIGH SCHOOL	APO	NY	11252
AF	572005065	WOODBIDGE AMER. HIGH SCHOOL	APO	NY	9405
AF	572005080	CROUGHTON HS	APO	NY	9378
AF	572006000	ALCONBURY HIGH SCHOOL	APO	NY	9238
AF	572008060	LAKENHEATH AMERICAN HIGH	APO	NY	9179
AR	573002000	BAD AIBLING	APO	NY	9098
AR	573002010	HOHENFELS AMERICAN HIGH SCHO	AE	NY	11252
AR	573005030	ANSBACH AMERICAN HIGH SCHOOL	APO	NY	9326
AR	573006020	AUGSBURG AMERICAN HIGH	APO	NY	9178
AR	573006040	BAD KREUZNACH HIGH SCHOOL	APO	NY	9252
AR	573006060	BAUMHOLDER AMER. HIGH SCHOOL	APO	NY	9034
AR	573006080	BERLIN AMERICAN HIGH SCHOOL	APO	NY	9742
AR	573006100	BITBURG AMERICAN HIGH	APO	NY	9132
AR	573006110	BONN AMERICAN HIGH SCHOOL	APO	NY	9080
AR	573006125	OSTERHOLZ AMERICAN HIGH	APO	NY	9355
AR	573006130	FULDA AMERICAN HIGH SCHOOL	APO	NY	9146
AR	573006135	GEISSEN AMERICAN HIGH	APO	NY	9169
AR	573006140	FRANKFURT AMERICAN HIGH	APO	NY	9710
AR	573006150	HAHN AMERICAN HIGH SCHOOL	APO	NY	9109
AR	573006155	HANAU AMERICAN HIGH SCHOOL	APO	NY	9165
AR	573006160	HEIDELBERG AMERICAN HIGH	APO	NY	9102
AR	573006190	INCIRLIC AMERICAN HIGH	APO	NY	9289
AR	573006192	IZMIR AMERICAN HIGH SCHOOL	APO	NY	9224
AR	573006220	KAISERSLAUTERN AMER. HIGH	APO	NY	9012

**Instructions for completing
USMEPCOM Form 601-4-3-E, Student ASVAB Test Record
(Overseas Only)**

NY OVERSEAS SCHOOL LISTING CONTIUNED					
AR	573006240	KARLSRUHE AMERICAN HIGH	APO	NY	9164
AR	573006245	RAMSTEIN AMERICAN HIGH	APO	NY	9012
AR	573006255	PATCH AMERICAN HIGH SCHOOL	APO	NY	9131
AR	573006260	STUTTGART AMERICAN HIGH	APO	NY	9279
AR	573006280	MANNHEIM AMERICAN HIGH	APO	NY	9086
AR	573006300	MUNICH AMERICAN HIGH	APO	NY	9407
AR	573006320	NURENBURG AMERICAN HIGH	APO	NY	9696
AR	573006330	VILSECK AMERICAN HIGH	APO	NY	9114
AR	573006360	GENERAL H. ARNOLD HIGH	APO	NY	9457
AR	573006400	WUERZBURG AMERICAN HIGH	APO	NY	9801
AR	573006410	ZWEIBRUCKEN AMER. HIGH	APO	NY	9860
AR	573006450	BAMBERG AMERICAN HIGH	APO	NY	9130
AR	573007000	ULM AMERICAN HIGH SCHOOL	APO	NY	9035
AR	574006030	AVIANO AMERICAN HIGH SCHOOL	APO	NY	9293
AR	574007020	LIVORNO AMERICAN HIGH	APO	NY	9019
NA	574007041	NAPLES AMERICAN HIGH SCHOOL	FPO	NY	11252
NA	574007043	BRINDISI HIGH SCHOOL	FPO	NY	9240
NA	574007050	STEPHEN D DECATUR HIGH	FPO	NY	9523
NA	574007060	VICENZA AMERICAN HIGH	APO	NY	9221
NA	575006010	AFCENT HS	APO	NY	9011
AF	575006020	SOESTERBERG AMERICAN HIGH	APO	NY	9292
MC	575008010	W.T. SAMPSON HIGH SCHOOL	FPO	NY	11252
AF	576009050	DAVID G FARRAGUT HIGH	FPO	NY	9540
AR	576009055	LAJES HIGH SCHOOL	FPO	NY	11252
AF	576009060	TORREJON AMERICAN HIGH	APO	NY	9283
AF	576009070	ZARAGOZA AMERICAN HIGH	APO	NY	9286
AR	576009075	A.T. MAHAN HS	FPO	NY	11209
AF	576009998	INTERNTL. SCHOOL OF ABERDEEN	FPO	NY	11252

**Instructions for completing
USMEPCOM Form 601-4-3-E, Student ASVAB Test Record
(Overseas Only)**

HONOLULU OVERSEAS SCHOOL LISTING					
SERVICE ASSIGNED	SCHOOL CODE	SCHOOL NAME	CITY	STATE	ZIP
AF	589991550	EDGREN HIGH SCHOOL	APO AP	CA	96319
AF	589991661	KADENA HIGH SCHOOL	APO AP	CA	96368
AF	589991970	YOKOTA HIGH SCHOOL	APO AP	CA	96293
AF	589992060	OSAN AMERICAN HIGH SCHOOL	APO AP	CA	96278
AR	589991980	ZAMA AMERICAN HIGH SCHOOL	APO AP	CA	96338
AR	589992030	PUSAN AMERICAN HIGH SCHOOL	APO AP	CA	96257
AR	589992040	SEOUL AMERICAN HIGH SCHOOL	APO AP	CA	96205
AR	589992050	TAEGU AMERICAN HIGH SCHOOL	APO AP	CA	96218
MC	589991580	PERRY HIGH SCHOOL	FPO AP	CA	96310
MC	589991660	KUBASAKI HIGH SCHOOL	FPO AP	CA	96373
NA	589991581	KING SCHOOL	FPO AP	CA	96322
NA	589991940	KINNICK HIGH SCHOOL	FPO AP	CA	96349

School Year: Enter the current school year.

Test Options: Note; only MEPS personnel are authorized to assign release option 7

Option	Release of the test results to the recruiting Services.
1	No special instructions. Release results to recruiting military services 7 days after test scores are mailed.
2	Release results to recruiters 60 days after test scores are mailed. No recruiter contact prior to that time.
3	Release results to recruiters 90 days after test scores are mailed. No recruiter contact prior to that time.
4	Release results to recruiters 120 days after test scores are mailed. No recruiter contact prior to that time.
5	Release results to recruiters at the end of the school year. No recruiter contact prior to that time.

**Instructions for completing
USMEPCOM Form 601-4-3-E, Student ASVAB Test Record
(Overseas Only)**

6	Release results to recruiting military services 7 days after test scores are mailed. No telephone solicitations by recruiter based on the student names provided with the listing of student results.
7	Not valid for enlistment purposes. Results not released to recruiting military services.
8	No recruiter contact from this listing of student results. Results not released to recruiting Services.

Students Scheduled: Enter the total number of students scheduled by grade

Total Scheduled: Enter total number of students (including mandatory) from all grades scheduled for testing.

Mandatory For: Enter the total number of students by grade for whom the test is mandatory.

Total Proctors Required: Enter the total proctors required.

School Student Pop: Enter the total population of the school by grade.

Test Location: Enter the test location.

Multiroom Test? Enter Y (for yes) or N (for no).

Break Requested? Enter Y (for yes) or N (for no).

Initial SY Exam? Enter Y (for yes) or N (for no).

Lapboards Required? Enter Y (for yes) or N (for no).

Initial Exam Ever? Enter Y (for yes) or N (for no).

SECTION II - School Confirmation

Date Confirmation Letter Mailed: Write in the date confirmation letter was mailed.

Date School Contacted to Confirm Test (5 days prior): This item will be completed by the responsible TA. Write in date of last confirmation contact with school prior to test.

Dates TA/Proctor Support Confirmed: Date of last confirmation of TA/proctor requirements.

SECTION III - Test Session Data – This section must be completed by the responsible TA.

Date Tested: Write in the date of the test.

Number of Test Booklets Used: Self-explanatory.

Was Proctor Support Satisfactory? Self-explanatory.

**Instructions for completing
USMEPCOM Form 601-4-3-E, Student ASVAB Test Record
(Overseas Only)**

Test Started On-Time? Self-explanatory.

Number of Students Tested: Place the number of students tested, by grade (i.e., 12th, 11th, 10th, Other). Write the total number of students tested in the “Total Tested” space. The total will be the same as the number of books utilized.

Remarks (Explain negative responses from above) – Self-explanatory.

TA Signature and Organization – The TA signs the form and indicates the organization for which he/she works.

Proctor Certification – Print full name(s) of proctor(s). For service proctors print rank and service/organization. For school proctors indicate school.

SECTION IV - ASVAB Proctor Duties and Responsibilities

This section is a briefing of the proctor’s duties and responsibilities. Obtain a signature and telephone number for each proctor.

Attachment 7

ASVAB Enlistment/Student Testing Materials List

**ASVAB Enlistment/Student Testing Materials List
(Overseas Only)
Updated June 23, 2006**

In the event that materials need to be ordered, contact your Service representative (Army may order directly).

Enlistment Testing

Manual for Administration (Enlistment) **DD Form 1304-2AM (May 03)**
Prescribes procedures and instructions for the administration of the Enlistment ASVAB.

Enlistment Answer Sheet - **DD Form 1304-2AS (Jan 02)**
Enlistment Test Booklets - **DD Form 1304-25A-ETB, 25B, 26A and 26B (Jan 02)**
PDA (Palm Pilot) - **1**

Student Testing

Manual for Administration (Student) **DD Form 1304-5AM (May 03)**
Prescribes procedures and instructions for the administration of the Student ASVAB.

Student Answer Sheet - **DD Form 1304-5AS (Jul 02)**
Student Test Booklets - **DD Form 1304-23A-STB, 24A, 24B (Jul 02),
and 23B (Sep 02)**

ASVAB Summary Results **DD Form 1304-5 (Jul 05)**
Audience: Students, Counselors, and Educators

This sheet indicates each student's actual ASVAB scores. It provides an explanation regarding what is included on the result sheet, gives score descriptions, etc.

ASVAB Summary Results (Sample) **DD Form 1304-5(S) (Jul 05)**
*Audience: Counselors, Educators, Test Administrators
and Overseas Recruiters*

The sample provides an explanation regarding what is included on the result sheet, gives score descriptions, etc. Used as a training tool for those individuals who do ASVAB post-test interpretation on student test results. Depending on the location, responsibility for post-test interpretation may fall under any number of individuals including the MEPS ESS, school counselor, Test Administrator, Education Center Representative or even Recruiters.

**ASVAB Enlistment/Student Testing Materials List
(Overseas Only)
Updated June 23, 2006**

The ASVAB Counselor Manual

DD Form 1304-5CM (Nov 05)

Audience: Counselors

This manual includes some important technical and administrative information about the ASVAB program, suggestions about how the program might be implemented at schools, and some additional career-related resources that can help students begin their career exploration and development process.

**ASVAB Exploring Career,
Career Exploration Program (CEP) Guide**

DD Form 1304-5WB (Jul 05)

Audience: Students who have taken the ASVAB test.

The guide is delivered to school official (counselor) after the test session. The number issued should match the number of students tested plus one for the counselor. Books should not be issued based upon projected participation. The guides are to be used for ASVAB post-test interpretation.

ASVAB CEP Overview Guide

DD Form 1304-5OV (May 05)

Audience: Students, Parents, Educators and Counselors

This guide provides an overview of the ASVAB Career Exploration Program including sample questions for each of the eight sub-tests (2 each).

Technical Manual

DoD 1304.12-L-ASTP-TS (Dec 99)

*Audience: Counselors, educators, college instructors,
and researchers.*

The Technical Manual provides statistical data from the development of the test and historical information; also describes technical underpinnings of the IF and Occu-Find Booklet.

Military Careers (Book)

DD Form 1304-5MC (Sep 01)

Audience: Students/Counselors

Military Careers is provided to high school counselors and career centers. Availability to other institutions frequented by students (public libraries, for example) depends on whether school requirements (at least one per school testing) can still be met out of funded allotment. This book has been developed to help educators and youth learn about the many career opportunities the military has to offer and their correlation to civilian jobs. Also available through www.careersinthemilitary.com or www.todaymilitary.com

Recruiter Guide

DD Form 1304-5RG (Jan 05)

Audience: Recruiters

Each recruiter working the schools should have a copy of the Recruiter Guide. This guide is designed to provide an overview of the DoD ASVAB Career Exploration Program.

**ASVAB Enlistment/Student Testing Materials List
(Overseas Only)
Updated June 23, 2006**

The ASVAB Career Exploration Program Brochures Available through supporting MEPS
Audience: Counselors/Educators/Students

There are two brochures. One is geared towards counselors and educators and the other towards students. Both are used as a tool to introduce the ASVAB test. Both brochures have a block on the back for Point of Contact information of person marketing the ASVAB.

Assorted ASVAB Posters Available through supporting MEPS
Audience: Counselors/Students

These are for advertising the ASVAB. Some have an area designated for writing in the date and location of a test and some do not. Overseas bases could even post on base bulletin boards, etc.

Assorted Marketing or Promotional Material

Attachment 8

Personal Digital Assistant (PDA) Information Memorandum



DEPARTMENT OF DEFENSE
HEADQUARTERS, UNITED STATES MILITARY ENTRANCE PROCESSING COMMAND
2834 GREEN BAY ROAD
NORTH CHICAGO, ILLINOIS 60064-3094

INFORMATION MEMO

10 August 2005

FOR: OPM Area
Coordinators and
Overseas Services
Coordinators

OPM/USA/USAF/USN

FROM: Mr. Kevin Moore, Dir, MIT

A handwritten signature in black ink, appearing to read "K. Moore", written over a horizontal line.

SUBJECT: Test Administrators PDA Maintenance and Troubleshooting Guidance

- This document is designed to provide clear guidance to OPM Denver Distribution Center (DDC), Overseas Service Coordinators, and their Test Administrators for handling maintenance and troubleshooting issues with their PDAs/memory modules.
 - In the event the Test Administrator has a problem with his/her PDA that they cannot resolve, they are to contact their OPM Area Coordinator or Services Coordinator (overseas testing). If the Coordinator cannot fix the problem he/she only will contact the USMEPCOM Helpdesk at 847-688-3680, x7800. The Helpdesk will direct the issue to USMEPCOM, MIT-TSCO for resolution. For all overseas related issues, MIT-TSCO will also notify the HQ Overseas Testing Program Manager in MOP-TD.
 - MIT-TSCO will determine whether the PDA/module needs to be returned or if the TA or Coordinator can resolve the issue in the field with guidance.
 - If the PDA alone is determined to be defective by MIT-TSCO, then:
 - The OPM Coordinator will send it to DDC for replacement. The PDA will be sent without batteries and without the memory module. The module may be sent without the PDA. Also, CE 611-1 for shipping of Controlled-Test Material must be followed.
- or
- The Services Coordinator will send it to USMEPCOM, MIT-TSCO for replacement. The PDA will be sent without batteries and without the memory

module. The module may be sent without the PDA. Also, USMEPCOM Regulation 611-1 for shipping of Controlled-Test Material must be followed.

- If the PDA needs to be returned/repared, MIT-TSCO will coordinate the repair with USMEPCOM, MIT-CSD who will return the operational PDA to the DDC or the Service Coordinator to send to the Test Administrator. If the module is defective, MIT-TSCO will send a replacement to the appropriate Coordinator.
- Questions/Comments can be directed to Mr. Robert Tiegs at 847-688-3680, x7245

COORDINATION: HQ USMEPCOM MOP-TD

Prepared by: Capt Randall, (847) 688-3680, x7748

