

Procedures for Completing USMEPCOM Form 680-A-E, *Request for Examination*

General

The [USMEPCOM Form 680-3A-E](#) is the first, required document completed by an applicant and their sponsoring Service, used to properly process, determine eligibility for authorizing requested examinations at MEPS, and initiate the preliminary examination steps (aptitude and medical) as a pre-condition for enlistment into the Armed Forces. The form containing the applicant's personally identifiable information (PII) is the authoritative source document in identifying the applicant, validating the quality of the applicant's information supplied (e.g., Social Security Number (SSN) with Social Security Administration (SSA), prior military service (PMS) check with Defense Manpower Data Center (DMDC), and Alien Registration Number (ARN) with U.S. Citizenship and Immigration Service (USCIS)), and establishing the applicant's claimed identity in the creation of their initial electronic personal data record. From the initial personal data record point of entry, the form represents the genesis to the enlistee's personnel record, medical record, and security records.

The form contains the Privacy Act Statement, Medical Records Release Authority, and certifications by the applicant and sponsoring recruiting Service personnel for the accuracy of information provided. A fully completed and certified [UMF 680-3A-E](#) must be presented before requested examination is administered (aptitude and medical). The original form must include the reverse-side Privacy Act Statement. The form is to be completed in its entirety using blue, black or blue/black ink only; inclusive of signatures. The applicant's legible and legal signature (comparable to how a check is signed or is displayed on an Identification Document (ID); for example: *John H. Smith*) on the form authorizes the release of PII and constitutes acceptance of a conditional offer of enlistment.

Each recruiting Service will coordinate their system's automated versions of the form with USMEPCOM/J-3/MEOP-AD prior to use for applicant processing.

Manual processing - provides the historical paper trail when USMIRS is not operational. [UMF 680-3A-E](#) contains aptitude data that is readily available when USMIRS is not operational or at a Military Entrance Test (MET) site, which decreases the possibility of ASVAB tests being invalidated due to retesting too soon or using the same version within 6 months. It is also used for signature verification when e-Security is not available.

Procedures

Accuracy of the data elements on the form is the responsibility of the applicant and the sponsoring Service; e.g., data on race or ethnicity supports each Service's affirmative action plan and assessment process; religious preference supports determination in the proper mix of chaplains in each Service; marital status supports allocation of appropriate pay and benefits, etc.

MEPS will perform quality assurance of the data presented on [UMF 680-3A-E](#) to verify the form is completed IAW these instructions. Additionally, MEPS will verify or enter the information provided by the sponsoring Service from [UMF 680-3A-E](#) into USMIRS.

Signatures on the form are used to positively identify the applicant in conjunction with

verifying that the applicant understands the information he/she provided is true and accurate (Item 25). Signature verification between Items 21 and 25f ensures the applicant that signed the [UMF 680-3A-E](#) with the recruiter is the same applicant submitting biometrics for enrollment. When biometric enrollment is unavailable, signature verification between Items 23 and 25f (along with Photo ID) positively identify the applicant for the TA, while comparative analysis from Item 23 to Item 21 further ensures the same applicant that took the ASVAB is the same applicant requesting further MEPS processing.

MEPS will not accept forms with whiteout corrections. If an error is discovered and the Service is unable to provide a corrected form, the entry will be drawn through with a single line, the updated information entered, and initialed by the applicant. If an incomplete item or error cannot be corrected, the applicant will be placed in an administrative hold status (as applicable) and referred back to the sponsoring Service. If the applicant erroneously signed in an incorrect area (e.g., Item 23 before the ITA witnesses the applicant sign at an iCAT MET site) perform the same line-out procedures and then direct applicant to provide a new signature on reverse side of form, flipped over from bottom to top. The MEPS user is now able to perform a signature verification by flipping the very bottom of the form over to compare against Item 25.

The [UMF 680-3A-E](#) is maintained in the applicant's packet record. File under RN 601-270a (see [Recordkeeping Requirements](#)).

Item A - SERVICE PROCESSING FOR: (Sponsor) Enter the specific Service code for which the applicant is processing (e.g., Regular Army, Army National Guard, Regular Air Force, Air Force Reserve, Air National Guard, etc.) IAW the [Accession Data Dictionary](#) Service Processing For (SPF).

Item B - PRIOR SERVICE (PS): (Sponsor)

- **Yes / No** - Enter an "X" in either the "Yes" or "No" block, based on the respective recruiting Service definition of "Prior Military Service (PMS)" IAW with applicable directives.
- **Number of Days** - Enter total active duty days if item B is "Yes"; entry must be at least 1 day.

NOTE: If "No" is selected, the USMIRS-printed [UMF 680-3A-E](#) will display four zeros.

Item C - SELECTIVE SERVICE CLASSIFICATION: Leave blank, unless directed by HQ USMEPCOM (information only entered by MEPS during mobilization or induction processing).

Item D - SELECTIVE SERVICE REGISTRATION NUMBER: Leave blank, unless directed by HQ USMEPCOM (information only entered by MEPS during mobilization or induction processing).

Item 1 - Social Security Number: (Sponsor) Enter the applicant's Social Security Number

(SSN) (nine numeric characters) as assigned by the Social Security Administration (as reflected on the authorized SSN verification document)

Item 2 - NAME: (Sponsor) Enter the applicant's full legal name (last, first, middle name order) in capital letters with one space between each name field. As applicable, enter the maiden name and suffix (Jr., Sr., etc.). Entering a nickname (Jeff vs. Jeffrey, Bill for William) in lieu of a full legal first name is not authorized. Entering a middle initial in lieu of a full legal middle name is authorized for an applicant who has only a middle initial as part of their legal name. There is a maximum 62-character limit; broken down as follows:

- Last name – 2 character minimum; 26 maximum
- First & middle names – 1 character min each; 15 max each
- Suffix – 6 character max
- Apostrophes are not a valid character in USMIRS
- [Single names](#) or [single-character names](#) will follow special procedural guidance available on the [J-3, Accession Division Sharing Policy Experience and Resources \(SPEAR\) page](#).

Item 3 - CURRENT ADDRESS: (Sponsor) Enter the street, city, county, state, country, and ZIP-code (+4-digit suffix). For foreign addresses, enter the ZIP-code+4 (if applicable) or all 0s and the 2-character country code. The state, county, and country codes will be recorded IAW the [Accession Data Dictionary](#).

Item 4 - HOME OF RECORD ADDRESS: (Sponsor) If different from Item 3, 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 "Same as Item 3" or enter the same address.

Item 5 - CITIZENSHIP: (Sponsor) Enter an "X" in the appropriate block(s) for applicant citizenship status.

Item 5a - U.S. AT BIRTH: Enter "X" if the applicant is born a US citizen. If Item 5a is selected, Item 5a (1) "Native Born" or Item 5a (2) "Born Abroad of U.S. Parent(s)" must also be selected. Native born includes an individual born in the United States, Puerto Rico, the US Virgin Islands, Guam, the Northern Mariana Islands (and did not declare the exception in Item 5c), the Panama Canal Zone before October 1, 1979 (pursuant to [8 USC Section 1403](#)), and an individual whose parent is a U.S. citizen, IAW [The Child Citizenship Act](#).

Item 5b - U.S. NATURALIZED: Enter "X" if the applicant is a former immigrant alien that is now a naturalized US citizen (either through their own effort or derived from the naturalization of their parents)

Item 5c - U.S. NON-CITIZEN NATIONAL: Enter "X" if the applicant is from American Samoa, Swain's Island, or is from the Northern Mariana Islands AND within 6 months after reaching 18 years of age; declared under oath their intention to be a national, but not US citizen.

Item 5d - IMMIGRANT ALIEN: Enter "X" if the applicant is an alien who has been granted

the right by the United States Citizenship and Immigration Services (USCIS) to reside permanently in the United States and to work without restrictions. Also known as a Lawful Permanent Resident (LPR). All immigrants are eventually issued a “green card” (USCIS Form I-551), which is the evidence of the alien’s LPR status. LPR’s who are awaiting the issuance of their green cards may bear an I-551 stamp in their foreign passports. Enter the applicant’s 2-character Country Code IAW the [Accession Data Dictionary](#).

NOTE: USMIRS data field displays COC for “Country of Citizenship.”

Item 5e - NON-IMMIGRANT FOREIGN NATIONAL: Enter “X” if the applicant is from a Compact of Free Association country and specify (Federated States of Micronesia (FSM), Republic of Marshall Islands (RMI), or Republic of Palau (ROP)).

Item 5f - ALIEN REGISTRATION NUMBER: (Sponsor) Enter the Alien Registration Number (ARN) as assigned by the U.S. Citizenship and Immigration Services.

(Air Force) Line through block one and starting with block two, enter the applicant’s 9-digit ARN. Upon completion, block one will have a line through it and blocks two through ten will incorporate the ARN.

(MAVNI) Enter all 5s for Military Accessions Vital to the National Interest (MAVNI) applicants that have not been issued an ARN from USCIS.

(MEPS) If applicant has an ARN, but it is not available for ASVAB testing, temporarily enter all 9s.

Item 6 – SEX: (Sponsor) Enter "X" in the appropriate gender block.

Item 7a – ETHNIC CATEGORY: (Sponsor) Enter an “X” in the applicable block.

Item 7b – RACIAL CATEGORY: (Sponsor) Enter an “X” in the applicable block(s).

Item 8 – MARITAL STATUS: (Sponsor) Enter the legal marriage status IAW the [Accession Data Dictionary](#).

Item 9 – NUMBER OF DEPENDENTS: (Sponsor) Enter the number of individuals who are totally or partially dependent on the applicant for support; with a maximum allowable of 10.

Item 10 – DATE OF BIRTH: (Sponsor) Enter the date of birth (DOB) in YYYYMMDD format.

(MEPS) Verify the applicant is eligible for enlistment processing.

Note: An applicant younger than 17 is not eligible for enlistment processing and therefore, will not be given an ASVAB enlistment test and/or a medical examination.

Item 11 – RELIGIOUS PREFERENCE: (Sponsor) This data element is optional. Enter the applicant’s 2-character religious preference code IAW the [Accession Data Dictionary](#),

Religious Denomination.

Item 12 – EDUCATION: (Sponsor) Enter the total years of education completed (first two numeric characters) and the education certification code (third character) from Table D-1.

CREDENTIAL	CODE	DEFINITION
Tier 1		
Currently in High School	9	An individual currently in high school who is not yet a high school senior.
High School Senior	S	An individual attending high school as a senior.
Currently Enrolled, Other Than A High School Diploma	M	An individual who is currently enrolled and attending a secondary or post-secondary program.
High School Diploma	L	A diploma issued to a graduate of a public or private 12-year, “traditional,” credit-based day program of classroom instruction. Includes individuals who met all requirements for graduation, but failed to pass mandated exit exams (formerly Code F).
Completed One College Semester	8	A non-high school diploma graduate who completed 15 semester hours/22 quarter hours of college level credit or 675 clock hours from an accredited traditional or online post-secondary institution.
Associate Degree	D	An associate degree from an accredited traditional or online post-secondary institution.
Professional Nursing	G	A diploma from an accredited 3-year hospital school of nursing program.
Baccalaureate Degree	K	A baccalaureate degree from an accredited traditional or online post-secondary institution.
Master’s Degree	N	A master’s degree from an accredited traditional or online post-secondary institution.
Post Master’s Degree	R	A degree conferred from an accredited institution that is beyond the master’s level but below the doctorate level.
Doctorate Degree	U	A doctorate degree from an accredited degree granting institution.
First Professional Degree	W	A degree/certificate awarded upon completion of the academic requirements in selected professions: Dentistry (D.D.S. or D.M.D.), Law (L.L.B. or J.D.) Medicine (M.D.) Theology (B.D.) and so forth.
“Covered Graduates” Possessing:		

Adult Alternative Diploma	B	A diploma issued to a graduate of a public or private non-traditional school using alternative methods of instruction to complete graduation credit requirements based on state law (i.e., all alternative, accelerated, or high school completion programs to include the GED Test Option).
Virtual/Distance School Diploma	7	A diploma awarded upon completion of an accredited Home Study, Distance Learning, Independent Study, Self-Study, Correspondence School, Cyber School or Virtual Learning Program.
Home School Diploma	H	A diploma issued to a graduate of a home school program in accordance with State requirements, administered by a parent, teacher/school district, or umbrella association.
Tier 2		
Test-Based Equivalency Certificate	E	A certificate of General Educational Development (GED) or other test-based credential obtained solely by testing.
National Guard Youth ChalleNGe Program	X	A GED Certificate or other test-based credential obtained by completing a 22-week National Guard Youth ChalleNGe Program (NGYCP) and passing the test.
Occupational Program	C	Certificate received for completing a 6-month vocational-technical program and a minimum of 11 years of secondary education.
High School Certificate of Attendance, Completion or Special Education	J	An attendance-based high school certificate issued to students based on an Individualized Education Program (IEP) that involves community experiences, employment, training, daily living skills and post-school transition skills which differ from the traditional high school graduation requirements.
Tier 3		
Less than High School Diploma or Credential	1	An individual who is not currently in a secondary education program and has no diploma/credential.

Item 13 – PROFICIENT IN FOREIGN LANGUAGE: (Sponsor) Enter an "X" in either the "Yes" or "No" block, based on applicant self-disclosure (foreign language = any language other than English). If “Yes”, enter the language code(s) IAW the [Accession Data Dictionary](#), Foreign Language Proficiency

Item 14 – VALID DRIVER’S LICENSE: Enter an "X" in either the "Yes" or "No" block. If “Yes” enter the valid driver’s license information (list state, number, and expiration date) as assigned by the state’s licensing authority.

Item 15 – PLACE OF BIRTH (POB): (Sponsor) Enter the applicant’s place of birth (city, state, country). The state and country codes will be recorded IAW the [Accession Data Dictionary](#).

Item 16 – APTITUDE: (Sponsor) Items 16a-d required for aptitude testing.

Item 16a - ASVAB REQUIRED TO ENLIST?: Enter an “X” in the “Yes” or “No” block based upon whether a qualifying ASVAB test score is or is not required for this enlistment.

Item 16b - ENLIST UNDER STUDENT TEST: Enter an “X” in the “Yes” or “No” block indicating whether the applicant elects to enlist with their student test scores.

Item 16c - TEST TYPE: If “Yes” is entered in Item 16a, then enter an “X” in the one of the following aptitude test type blocks:

- **INITIAL:** Indicates an initial enlistment ASVAB test is required.
- **SPECIAL:** Indicates special purpose testing is requested.
- **CONFIRMATION:** Indicates a confirmation ASVAB test is required.

Item 16d - RETEST TYPE: Enter an “X” in one of the following ASVAB retest type blocks (times are in calendar days and IAW [UMR 611-1, Enlistment Qualification Tests](#)):

- **1ST RETEST:** Indicates retesting and 1 month has elapsed after initial test.
- **2ND RETEST:** Indicates the next retest and 1 month has elapsed after the 1st retest.
- **6 MONTH RETEST:** Indicates the next retest and 6 months have elapsed since the 2nd retest.
- **IMMED RETEST AUTHORIZED:** Indicates the MEPS Commander has authorized an immediate retest using a different ASVAB version.

Item 16e - PREVIOUS TEST VERSIONS: Enter the previous ASVAB test version(s). The block allows entry for up to two of the most recently tested versions.

Item 16f - PREVIOUS TEST DATES: Enter the testing date of the previous ASVAB test version(s). The date must be in year-month-day format (YYYYMMDD). This block allows date entry for up to two of the most recently tested versions.

Item 17a – RECRUITER ID/SSN: (Sponsor) Enter (up to 9 characters) the Recruiter ID/SSN. The ID/SSN in this block does not need to match Item 30 Recruiter ID/SSN. Formatting rules include:

- **DFR/DFV** - Alphanumeric.
- **DMR/DMV** - Recruiter’s DoD ID number truncated by one character (9 out of the 10 numbers).
- **DAG** – First two characters are state numeric code (IAW [Accession Data Dictionary](#)); next three characters are Recruiter Station ID; last four characters are Recruiter specific.

Item 17b – STATION ID: (Sponsor) Enter recruiting station ID (up to five alphanumeric characters).

Item 18 – TEST ADMINISTRATOR SSN/ID: (MEPS)

Enlistment ASVAB Test Administration - Enter five zeros and the last four of the TA's SSN.
Student Test Score Pull – Enter nine zeros.

Item 19 – TEST ADMINISTRATOR SIGNATURE: (MEPS) TA administering the test signs here. A high school score pull does not require a signature.

Item 20 – MEDICAL: (Sponsor)

Item 20a - MEPS MEDICAL EXAM REQUIRED TO ENLIST?: Enter an “X” in the “Yes” or “No” block based upon whether a qualifying MEPS medical examination is or is not required for enlistment.

Item 20b - EXAM TYPE: If “Yes” is entered in Item 20a, then enter an “X” in the one of the following exam type blocks:

- **FULL:** Indicates a full medical exam is required.
- **INSPECT:** Indicates an inspection is requested.
- **SPECIAL:** Indicates a special full medical exam is required (Over-40 examination, etc.).
- **CONSULT:** Indicates a medical exam provided by a contracted physician to evaluate possible medical limitations of an individual.
- **RE-EXAM:** Indicates a full medical re-exam is required.
- **OTHER:** Indicates an “other” form of medical processing is requested (DAT only, etc.).

Item 20c - DATE LAST FULL MEDICAL EXAM: Enter date the last full medical examination was taken; format is in year-month-day (YYYYMMDD).

Item 21 – APPLICANT’S SIGNATURE: (MEPS) Used for applicant positive identification either through biometric enrollment signature verification or e-Security failure mode signature verification.

- **e-Security Unavailable; Applicant Testing Only:** No wet-ink signature required.
- **e-Security Unavailable; Operations and/or Medical Processing:** Applicant wet-ink signature in presence of MEPS personnel for signature verification against Item 23 signature (or 25f if testing not required).
- **e-Security Available; Applicant Not Biometrically Enrolled:** Wet-ink signature verification required for e-Security biometric enrollment (IAW [UMR 601-23](#)). Applicant signs Item 21 and MEPS personnel verify against the Item 25f signature. If a [UMF 680-3A-E](#) is pending delivery from a MET site, MEPS personnel will compare Item 21 signature against all applicant signatures on the MET site [UMF 680-3A-E](#) when it arrives.
- **e-Security Available; Applicant Partially or Fully Biometrically Enrolled:** No wet-ink signature required.

- **e-Security Available; Applicant Requires Partial or Full Biometric Reenrollment:** No wet-ink signature required.
- **e-Security Available; Applicant Biometrically Enrolled; Successfully Verified During Initial MEPS Check-In:** No signature required.

Item 22 – MIRS CODING: (MEPS) Only required in System failure mode – manually code the data block(s) with the initial test or medical examination workload identification (WKID) transaction (e.g., B100, B200, B010, B030, etc.); the status code (ST); the test/examination date (DATE); and the initials (INT) of the individual manually coding the transaction. The second DATE and INT blocks are for the individual entering the manually recorded processing results when the System returns to normal operations.

Item 23 – APPLICANT CERTIFICATION IN PRESENCE OF TEST

ADMINISTRATOR: (MEPS) Used for wet-ink signature verification when testing is requested and e-Security is not available (MET site, e-Security failure mode, USMIRS failure mode, etc.). IAW [UMR 611-1](#), the Test Administrator is “the individual responsible for the required testing material on the [UMF 611-1-9-R-E, Daily Inventory Log](#) and will administer the test session.” A TA performing duties in a different section (e.g., the Operations Control Desk) will not require the applicant to sign Item 23.

- **e-Security Unavailable:** Wet-ink signature verification IAW [UMM 680-3-1](#). Enter an “X” in the “Yes” or “No” block if a Photo ID was presented for positive identification. If “Yes”, enter “type/organization” and “ID Number.” If “No”, complete Item 24.
- **e-Security Available; Applicant Not Biometrically Enrolled:** Enroll applicant; if successful (to include partial enrollment), no signature required in Item 23.
- **e-Security Available; Applicant Partially or Fully Biometrically Enrolled:** No signature nor ID required.
- **e-Security Available; Applicant Biometrically Enrolled; Successfully Verified During Initial MEPS Check-In:** No signature nor ID required.

Item 24 – RIGHT THUMBPRINT (MEPS): Used when e-Security is unavailable and a photo ID is not presented, is invalid (expired, etc.), or the MEPS testing personnel is unable to verify the applicant identity with the photo ID (physical appearance does not match, ID information does not match other personal data or document information, etc.). Capture the applicant’s right thumbprint in Item 24. If unsuccessful, turn form over (top of form on the bottom) and affix right thumbprint on upper right corner, thumbnail pointed to the left.

Item 25 – APPLICANT CERTIFICATION IN PRESENCE OF RECRUITING

PERSONNEL: (Sponsor) The applicant certifies they are the person identified on this form and the information is correct. The applicant must indicate if they have ever taken the ASVAB, including the student test, and if so, when and where. The applicant is fully aware at the time of signing Item 25 that all information is correct, and the purpose of the information and all release authorizations are understood as well.

Item 25a – Enter an “X” if the applicant never tested under the enlistment or student ASVAB programs.

Item 25b – Enter an “X” if the applicant has tested under the enlistment or student ASVAB programs. Indicate the most recent date tested (in year-month-day format – YYYYMMDD) along with the testing location.

Item 25c – Enter an “X” if applicant tested under the student test program and requests the student test scores. Indicate the most recent date tested (in year-month-day format – YYYYMMDD) along with the testing location.

Item 25d – Enter an “X” if the applicant elects to keep the AFQT scores from the student test in Item 25c.

Item 25e – Enter the current or last high school attended.

Item 25f – (MEPS) The applicant signs, enters their SSN and dates the form in the presence of recruiting personnel. MEPS will verify the SSN matches Item 1.

Item 26 – APPLICANT’S CURRENT MEDICAL INSURER NAME: (Sponsor) Enter the applicant’s current medical insurance company. If none, the applicant will sign to affirm they have no current medical insurer.

Item 27 – APPLICANT’S CURRENT MEDICAL PROVIDER NAME: (Sponsor) Enter the applicant’s current medical provider. If none, the applicant will sign to affirm they have no current medical provider.

Item 28 – MEDICAL INSURER ADDRESS: (Sponsor) If Item 26 is “None”, this data block may be blank.

Item 29 – MEDICAL PROVIDER ADDRESS: (Sponsor) If Item 27 is “None”, this data block may be blank.

Item 30 – CERTIFICATION BY RECRUITING PERSONNEL: (Sponsor) Authorized recruiting personnel sign certifying they have properly identified the applicant; reviewed the form for completeness and accuracy; and witnessed the applicant’s signature IAW Service directives. False certifications will be forwarded to the appropriate Service Liaison/Guidance Counselor for disposition IAW Service directives. Furthermore, if it is discovered an applicant was administered an unauthorized retest or incorrect test version due to inaccurate data on the [UMF 680-3A-E](#), the test will be invalidated with appropriate USMIRS action.