

# MILITARY RESERVE EXCHANGE PROGRAM

## Officer/Noncommissioned Officer Application

### Privacy Act Statement

**AUTHORITY:** 10 U.S.C. 136, Under Secretary of Defense for Personnel and Readiness; DoD Instruction 1215.15, Military Reserve Exchange Program (MREP).

**PURPOSE:** To apply for and recommend participation in the Military Reserve Exchange Program (MREP).

**ROUTINE USES:** Disclosure of records are generally permitted under 5 U.S.C. 522a(b) of the Privacy Act of 1974, as amended. Pursuant to 5 U.S.C. 522a(b)(3), records may be disclosed as a routine use to such recipients and under such circumstances and procedures as are mandated by Federal statute or treaty. A complete list of routine uses may be found in the applicable System of Records Notice, DoD 0005, Defense Training Records at: <https://www.federalregister.gov/documents/2020/12/28/2020-26548/privacy-act-of-1974-system-of-records>.

**DISCLOSURE:** Voluntary. However, failure to provide requested information may prohibit participation in the MREP program.

<b>1. PROGRAM YEAR</b>		<b>2. RESERVE COMPONENT</b> <i>(If National Guard, complete item 3.)</i>			
		Component:		Status:	
<b>3. NATIONAL GUARD</b> <i>(If applicable)</i>			<b>4. RANK</b>		<b>5. ANTICIPATED PROMOTION DATE</b> (YYYYMMDD)
a. STATE		b. STATE OML			
<b>6. NAME:</b> a. LAST		b. FIRST		c. MIDDLE	
				<b>7. SEX</b> <i>(X one)</i> <input type="checkbox"/> Male <input type="checkbox"/> Female	
<b>8. HOME ADDRESS</b> <i>(Street, Apartment Number, City, State and ZIP Code)</i>				<b>9. TELEPHONE NUMBERS</b> <i>(Include Area Code)</i>	
				a. HOME	
				b. CELLULAR	
<b>10. PRIMARY EMAIL ADDRESS</b>			<b>11. SECONDARY EMAIL ADDRESS</b>		
<b>12. PASSPORT(S)</b>	a. OFFICIAL: Number		Expires: (YYYYMMDD)		b. TOURIST: Number
					Expires: (YYYYMMDD)
<b>13. CIVILIAN OCCUPATION/POSITION</b>				<b>14. WORK TELEPHONE NO.</b> <i>(Include Area Code)</i>	
<b>15. CIVILIAN EDUCATION</b>					
<b>16.a. MILITARY UNIT OF ASSIGNMENT:</b>					
b. UNIT POINT OF CONTACT AND ADDRESS				c. UNIT TELEPHONE NO. <i>(Include Area Code/DSN)</i>	
				d. UNIT EMAIL ADDRESS	
e. DUTY POSITION/TITLE					
f. UNIT ROLES/RESPONSIBILITIES					

<b>17. PRIMARY MOS/AFSC/DESIGNATOR/RATING</b>	<b>18. SECONDARY MOS/AFSC/DESIGNATOR/RATING</b>	<b>19. LEVEL OF SECURITY CLEARANCE AND EXPIRATION</b>
<b>20. LAST FITNESS ASSESSMENT DATE (YYYYMMDD)</b>		<b>21. MEDICALLY DEPLOYABLE (X one)</b>
		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>22. PERMANENT PROFILES (X one)</b>		
<input type="checkbox"/> No <input type="checkbox"/> Yes (If yes, what for?):		
<b>23. HAVE YOU PARTICIPATED IN THE EXCHANGE PROGRAM BEFORE? (X one)</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>24. PAST MILITARY ASSIGNMENTS</b>		
<b>25. DESCRIBE OPPORTUNITIES YOU WOULD LIKE TO EXPERIENCE</b>		
<b>26.a. UNIT ANNUAL TRAINING DATES AND LOCATION(S):</b>		
<b>b. IF REQUIRED, CAN YOU ATTEND TWO ANNUAL TRAINING PERIODS?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>c. ANY PERIODS YOU ARE UNABLE TO ATTEND ANNUAL TRAINING OVERSEAS</b>		
<b>27. LANGUAGE PROFICIENCY (Not mandatory)</b>		
<b>28. APPLICANT</b>		
a. SIGNATURE (Digital)	b. DATE SIGNED (YYYYMMDD)	c. EMAIL
<b>29. SUPERVISOR</b>		
a. SIGNATURE (Digital)	b. DATE SIGNED (YYYYMMDD)	c. EMAIL
<b>30. COMMANDER'S APPROVAL</b>		
<p>Commander's signature recommending participation in the exchange program and certifying the member is worldwide deployable, is not on a medical profile, and successfully passed service specific Fitness Assessment. The Unit Commander is also validating that he/she may serve as the U.S. host unit, when applicable, for Allied nation participant during the unit's Annual Training. As indicated in the corresponding Allied nation memorandums of understanding, the U.S. host unit is responsible for coordinating the local transportation, lodging, mess, and training for the foreign participant. Additionally, the U.S. host unit may be responsible for costs associated with further relocation and duty travel that occurs during the foreign participant's exchange.</p>		
a. SIGNATURE (Digital)	b. DATE SIGNED (YYYYMMDD)	c. EMAIL