

## **Reserve Officer Trainee Application**

First Name M	I Last Name
Mailing Address	City
State Zip	E-mail
Social Security # Co	unty of Residence
Date of Birth/ Te	elephone ()
Emergency Contact	Emergency Contact#
Racial/Ethnic Group (Please choose only one):Uhite/CaucasianBlack/African AmeHispanic/LatinoHawaiian Native/Pacific Is	
Level of Education (Please choose only one):Less than High SchoolHigh School Diploma / GEDSome College without DegreeAssociate DegreeBachelor DegreeGraduate / Professional Degree	
Employment Status/Type: Employed Unemployed Retired	
□ Full-time □ Part-time □Seasonal □ Ten	nporary
Current or most recent employer:	
<u>Gender:</u> □ Male □ Female <u>Age:</u>	
Enrollment Status:  Part-Time (less than 12 credit hours in fall or spring; less than 6 in the summer)  Full-Time (12 or more credit hours in the fall or spring, 6 in the summer)  Degree Program  Certificate Program  Degree shock all that apply	
Please check all that apply: Veteran Disabled Pell Grant Eligible TAA Eligible	
Signature	Date