

**APPLICATION VERSION:**

**23 OCT 2018**

**FOR OFFICIAL USE ONLY**

**34 ECAB ASSIGNMENT SCREENING QUESTIONNAIRE**

- I. The purpose of this survey is to help determine your initial eligibility for assignment within the 34 ECAB. This screening will be used to determine your trustworthiness, loyalty, reliability, personal conduct, responsibility, and emotional stability prior to selection for an Aviator Position.
- II. It is imperative that you answer each question completely and truthfully. It is important to note that responses to questions are not necessarily disqualifying, but may require further evaluation. Please take all the space required to explain responses in full detail. Answering questions and disclosing personal information is voluntary, but failure to provide the information could result in your application not being processed.
- III. Information obtained in this survey resulting from your truthfulness will be made available only to the Chain of Command and their appointed board panel. This information will be used solely for the purpose of determining current and or future eligibility for assignments within the 34 ECAB.
- IV. False statements will result in disqualification for assignment, both future and present.

**Please fill in all information where required. To answer yes or no you may double click on the box to tag it with an “X” or on the shaded box to enter an explanation. **Do Not Leave Anything Blank or your application will not be processed!****

Once this application is completed, please submit it in an email, Attention: Aviation Board in the body, via the hyper link to [ng.mn.mnarnng.mbx.assets-34th-cab-s1@mail.mil](mailto:ng.mn.mnarnng.mbx.assets-34th-cab-s1@mail.mil)

**In the “SUBJECT” of your email, use the following format: MOS, Last Name, First Name, and Rank, AVN Screening Questionnaire.**

**Example Subject:**

**15U Thomas Joseph SPC AVN Screening Questionnaire**

Once this packet is reviewed, you will be contacted with further information regarding the selection process.

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**Last Name, First Name, MI:**

**MOS:**

**SSN (NO dashes or spaces):**

**Date of Birth:**

**Current Rank:**

**Work Phone #**

**Cell Phone #**

**Home Phone #**

**Email Address AKO:**

**Email Address other than AKO:**

**Unit S-1 Phone #**

**1SG Name:**

**1SG Email:**

**1SG Phone:**

**Supervisor/PSG Name:**

**Supervisor/PSG Email:**

**Supervisor/PSG Phone:**

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Please answer the following questions truthfully and as complete as possible. Failure to do so will result in immediate termination from the application process.

1. **What is your most current APFT score (annotate month/year)?**
  
2. **What are your last three APFT scores (please annotate month/year)?**  
Score            Date  
  
Score            Date  
  
Score            Date
  
3. **Have you ever failed a Tape Test?**  
  
 Yes  No  
  
**IF YES  
EXPLAIN WHEN AND UNDER WHAT CIRCUMSTANCES:**
  
4. **Do you have difficulty maintaining your weight within the Army standards?**  
  
 Yes  No  
  
**IF YES  
EXPLAIN:**
  
5. **Are you a single parent with primary physical custody?**  
  
 Yes  No  
  
If yes (do you have a family care plan?)     Yes  No
  
6. **Are you a single parent who does not have primary physical custody, but has visitation rights? If yes, please explain your projected visitation arrangements.**
  
7. **How long do you intend to stay in the Army?**
  
8. **If you had to Re-Enlist or extend your service obligation today would you?**     Yes  No
  
9. **Will you have 3 years remaining in service upon arrival?**     Yes  No

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10. Are you a U.S. Citizen?  Yes  No

11. Do you possess a SECRET or higher clearance?  Yes  No  
If not. Have you applied for one?  Yes  No

12. Are you now or have you ever been a member of any organization associated with, or contributing to any movement or group that advocates the overthrow of the US Government?

Yes  No

IF YES

EXPLAIN:

13. Have you ever experienced financial difficulties that resulted in bankruptcy, repossession, tax lien, wage garnishment, judgment, or collection accounts?

Yes  No

IF YES

EXPLAIN:

14. Have you ever had any alcohol related arrests, treatment, or counseling?

Yes  No

IF YES

EXPLAIN:

15. Have you ever been denied a security clearance or had one revoked?

Yes  No

IF YES

EXPLAIN:

16. Have you illegally used, possessed, bought, sold, or transferred any illegal narcotic, depressant, stimulant, hallucinogen, cannabis, or any other illegal drug or controlled substance?

Yes  No

IF YES

EXPLAIN:

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17. **Have you ever been suspected of, charged with or convicted of any felony offense?**

Yes  No

**IF YES  
EXPLAIN:**

18. **Are there currently any charges pending against you for a criminal offense(s)?**

Yes  No

**IF YES  
EXPLAIN:**

19. **Have you ever been the subject of any inquiry involving the loss or mishandling of classified information or material?**

Yes  No

**IF YES  
EXPLAIN:**

20. **Have you ever been AWOL?**

Yes  No

**IF YES  
EXPLAIN:**

21. **As an adult (18 years or older) have you ever purposefully damaged or vandalized property that did not belong to you?**

Yes  No

**IF YES  
EXPLAIN:**

22. **Have you ever been associated with a Gang or any other Racist/ Extremist Organization that used or advocated intimidation or violence against others?**

Yes  No

**IF YES  
EXPLAIN:**

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23. **Have you failed to support any children, abandon them, or fail to pay child support?**

Yes  No

**IF YES  
EXPLAIN:**

24. **Have you ever abused or neglected a child, or been investigated for abuse or neglect of a child?**

Yes  No

**IF YES  
EXPLAIN:**

25. **Have you ever willfully disobeyed any law or regulation because of your personal beliefs?**

Yes  No

**IF YES  
EXPLAIN:**

26. **Have you ever been arrested, even if not formally charged?**

Yes  No

**IF YES  
EXPLAIN:**

27. **Have you ever been suspected of, accused of, charged with or convicted of domestic abuse or been referred to social work services resulting from a domestic incident or any other type of incident?**

Yes  No

**IF YES  
EXPLAIN:**

28. **A. Have you ever received an Article 15, (summarized, company grade or field grade)?  
B. Have you ever been issued a letter of reprimand at any level?  
C. Have court-martial charges (at any level) ever been preferred against you?**

Yes  No

**IF YES  
EXPLAIN the nature of the offense, the circumstances surrounding the offense and the punishment adjudicated:**

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29. **Have you ever been discharged from any branch of the military for any reason?**

Yes  No

**IF YES  
EXPLAIN:**

30. **Have you ever been treated by any mental health professional or other counselor, social worker, Psychologist, or Psychiatrist?**

Yes  No

**IF YES  
EXPLAIN:**

31. **Have you ever been hospitalized for any period of time?**

Yes  No

**IF YES  
EXPLAIN with injury, month and year:**

32. **Do you have any pre-existing injuries or conditions?**

Yes  No

**IF YES  
EXPLAIN:**

33. **Do you have any phobias or extreme fears?**

Yes  No

**IF YES  
EXPLAIN:**

34. **Have you ever been diagnosed with an attention deficit / hyperactivity disorder or a learning disorder?**

Yes  No

**IF YES  
EXPLAIN:**

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35. **Have you ever been prescribed any Psychotropic or Psychiatric medications? (I.E. Ritalin, Prozac, ETC...)**

Yes  No

**IF YES**

**EXPLAIN:**

36. **Have you ever been previously assigned to the 34<sup>TH</sup> CAB?**

Yes  No

**IF YES**

**EXPLAIN:**

37. **Have all of your answers been completely truthful?**

Yes  No



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**How did you learn about the 34<sup>TH</sup> CAB? Place as many numbers as applicable in this box and also explain the details in the blocks below as required.**

1. Email Request
2. Telephone Request
3. Visit Recruiting Office
4. OCS:
5. Warrant Officer Recruiter:
6. Website: Which Site?
7. Briefing: Where/When?
8. Supervisor/Name:
9. Other:

**Additional Feedback:** This is your chance to share any information about yourself that might be useful in making a decision about your assignment. Feel free to discuss your short and long term goals, skills and qualifications, etc.

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Attendance at the Prescreening event is not a requirement to Board, it is an information meeting to explain the board process.

**All Packets must contain the following documents submitted electronically by **Monday April 1<sup>st</sup> 2019!****

**Incomplete/ Late packets will be returned to the Soldier with no action.**

Send completed packets via e-mail, Attention: Aviation Board in the body, via the hyper link to [ng.mn.mnarnng.mbx.assets-34th-cab-s1@mail.mil](mailto:ng.mn.mnarnng.mbx.assets-34th-cab-s1@mail.mil)

**In the “SUBJECT” of your email, use the following format: MOS, Last Name, First Name, and Rank, AVN Screening Questionnaire.**

**Example Subject:**

**15U Thomas Joseph SPC AVN Screening Questionnaire**

**REQUIRED ITEMS**

- 1. Screening Questionnaire**
- 2. Three Letters of Recommendation**
- 3. 250 Word minimum Essay, “Why I want to be an Army Aviator.**
- 4. Resume – must include three non-family references, prefer work references**
- 5. Security Clearance – must have a SECRET**
- 6. Copy of your last three APFT/HT/WT scores**
- 7. Copy of your last three NCOER/OER/ROTC EVALS’s, or number available based on DOR**
- 8. DD214’s/NGB 22**
- 9. ERB/ORB/CDT Record Brief**
- 10. DA 1059’s for NCOES/OES**
- 11. SIFT score, ASVAB/GT scores**
- 12. College Transcripts (For Commissioned Officer only)**
- 13. Camp Evaluations-Advance Camp (ROTC Only)**

Your signature below shows that you have read and understand that upon arrival to the Pre-Screening event, if any of the above documentation is missing you will be turned away.

Selection at the 34<sup>TH</sup> CAB Aviation Board means that you are approved to continue processing and projected for a future IERW school date. It is **NOT** a guarantee for IERW. Final selection is based upon funding availability and FRB approval.

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Last, First, MI

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Sign

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Date