## U.S. ARMY CYBER DIRECT COMMISSIONING PROGRAM APPLICATION

## SUBMISSION CHECKLIST:

Completed version of this application form.

Transcripts of all undergraduate and graduate education (student or unofficial copies are sufficient for the initial phase; however, certified copies may be required later).

A minimum of a Bachelor's degree is required.

Cover letter or sample writing. Highlight strengths and experience that you believe qualify you for this program.

Most recent resume or up-to-date curriculum vitae.

Proof of relevant professional certification and/or certificates of completion for training.

Prior military service documents, if applicable (e.g.: DD214 or other official discharge papers)

Letter(s) of recommendation or reference (optional). Submit no more than three strong letters.

## **IMPORTANT NOTES:**

- ❖ Applicant must be a U.S. Citizen. Non–U.S. Citizens or Dual Citizens are not eligible.
- Ensure all personally identifiable information (e.g., social security number, personal phone number, and street address) is redacted throughout the application packet.
- After your application is sent, you will receive an email confirming receipt of your application packet within seven business days. Additional instructions and packet status notifications will follow if/when appropriate.
- ❖ If your experiences align with the specified requirements, you will be contacted by an Army Cyber Corps representative to schedule the interview process.

BASIC INFORMATION					
Demographic questions are optional, but your answers assist us with processing your application. Sign and date the form when complete.					
First:	MI: Last:		Last:		
Sex:	Age:				
Current City:			State:		
Phone:	Emai				
How would you describe yourself? (Race/Eth	nnicity):				
How did you hear about this program?					
Have you ever been convicted of a crime? YES NO					
If yes, please describe the crime, state nature of the crime(s), when and where convicted, and disposition of the case:					
If accepted, are you willing to submit to and pass a controlled substance test?  YES  NO					
How would you rate your current health?					
Note: Certain conditions may disqualify people from entering military service (e.g.: depression, ADHD requiring medication, obesity, major health issues). Speak with a recruiter for advice early in the application process if you believe you may have a disqualifying condition.					
Citizenship Status:					
Note: Non-U.S. citizens and dual citizens are	: ineligi	ble for	direct appointment as a	Cyber Office	r.

HIRING PATH					
I am seeking commission into:					
Specify valid position appl	ying for:				
Note: Provide one or more position for which you feel you are qualified from the list of available Cyber Officer positions for your Component(s) of choice.					
Detail the skills and qualifications you have acquired to include licenses, training certificates, certifications, awards, etc. that make you a match for the requirement preference:					
Do you speak, write, or un	derstand any foreign languages?	YES	NO		
If yes, give the language(s	and your level of fluency:				
MILITARY SERVICE					
Include a copy of your DD214 (Proof of Military Service) and/or other official documents confirming proof of military service/discharge, if applicable.					
Status:		Branch:			
Rank/Grade:	Total Years of Service (from DD214):	Yea	r(s) Mon	th(s)	
MOS/AOC/FA:					
Primary Duties:					
Other Details:					

EDUCATION, TRAINING, AND EXPERIENCE				
Include a copy of all colle List most recent educatio		ts, profession	al certifications, course com	pletion certificates, etc.
College/University 1:				
Name:				
Address:				
City:			State:	Zip:
Degree Pursued:			Major:	
Start Date:			Graduation Date:	
Did you graduate?	YES	NO		
College/University 2:				
Name:				
Address:				
City:			State:	Zip:
Degree Pursued:			Major:	
Start Date:			Graduation Date:	
Did you graduate?	YES	NO		
College/University 3:				
Name:				
Address:				T
City:			State:	Zip:
Degree Pursued:			Major:	
Start Date:			Graduation Date:	
Did you graduate?	YES	NO		
Destruction of Great Control				
Professional Certification	ns			

EMPLOYMENT HISTORY				
Detail your employment history relevant to the position for which you applied. Account for any gaps in employment during that period. List most recent employment first. Additional employment history pages are available for download, if needed.				
Are you currently employed?	YES	NO		
Employer/Company Name:				
Name of Supervisor:				
Business Type/Industry:				
City:			State:	
Length of Employment:			to	
Position(s) & Duties:				
Reason for leaving:				
May we contact this employer?	YES	NO	Phone:	
Employer/Company Name:				
Name of Supervisor:				
•				
Business Type/Industry:			Shaha	
City:			State:	
Length of Employment:			to	
Position(s) & Duties:				
Dancon for leaving:				
Reason for leaving:  May we contact this employer?	YES	NO	Phone:	
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Employer/Company Name:			
Name of Supervisor:			
Business Type/Industry:			
City:			State:
Length of Employment:			to
Position(s) & Duties:			
Reason for leaving:			
May we contact this employer?	YES	NO	Phone:
Employer/Company Name:			
Employer/Company Name:			
Name of Supervisor:			
Business Type/Industry:			6
City:			State:
Length of Employment:			to
Position(s) & Duties:			
Reason for leaving:			T .
May we contact this employer?	YES	NO	Phone:
Additional Comments on Employment	History:		
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PROFESSIONAL REFERENCES			
List at least three people who have extensive knowledge of your experience. Please include professional references only.			
Reference 1			
Name (Last, First):			
Occupation/Title:	Phone:		
Number of Years Acquainted:			
Reference 2			
Name (Last, First):			
Occupation/Title:	Phone:		
Number of Years Acquainted:			
Reference 3			
Name (Last, First):			
Occupation/Title:	Phone:		
Number of Years Acquainted:			
ACKNOWLEDGMENT			
I certify that the information contained in this application is true and complete. I understand that false			
information may be grounds for not hiring me or for immediate termination of employment at any			
point in the future if am hired. I authorize the verification of all information listed above.			
Signature:	Date:		

Detailed information on the Cyber Direct Commissioning Program can be found at: https://goarmy.com/army-cyber/cyber-direct-commissioning-program.html

Please send completed application packet to the following distribution list: usarmy.gordon.cyber-coe.mbx.occ-officers@mail.mil