U.S. ARMY
CYBER DIRECT COMMISSIONING PROGRAM APPLICATION

REQUIRED PACKET DOCUMENTS:

1. Completed/Signed Cyber Direct Commissioning Application.

2. Up-to-date resume/curriculum vitae.

3. Diploma and College transcripts showing GPA and degree completion (student or unofficial copies are sufficient for the initial phase; however, certified copies may be required later). Note: Bachelor's degree is the minimum requirement for direct commissioning.

4. If applicable, DD214 reflecting honorable military discharge or appropriate discharge/ separation documentation for Guard or Reserve military service.

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

6. No more than three (3) letters of recommendation or reference.

IMPORTANT NOTES:

➤ Applicants must be a U.S. Citizens; Non–U.S. Citizens or Dual Citizens are not eligible.

➤ Currently serving members of the military (any branch or component) are not eligible.

➤ Please redact social security number and/or DoDID number from all submitted documents.

➤ After your application is submitted, you will receive an email confirming receipt of your application packet within seven (7) business days. Additional instructions and packet status notifications will follow, if/when appropriate.

➤ If your education and experience align well with specified requirements, you will be contacted by an Army Cyber Corps representative to schedule an interview. Thank you for your interest in the Cyber Direct Commissioning Program!

Send completed application packet to the following distribution list:

usarmy.gordon.cyber-coe.mbx.occ-officers@army.mil

CYBER DIRECT COMMISSIONING APPLICATION

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:

Sex:	Age:	Race:

Current City:	State:

Phone:	Email:

How would you describe yourself? (Race/Ethnicity):

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

Do you currently hold a valid security clearance?   YES, type: 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 ineligible for direct appointment as a Cyber Officer.

COMMISSIONING PATH

I am seeking commission into:

Specify valid position applying for:

Note: Provide one or more position(s) for which you feel best qualified from the list of available Cyber Officer work roles on the Army Talent Management website.

Why do you believe you should receive a direct commission as a Cyber Officer? *Answer in paragraph format.*

EDUCATION AND TRAINING

Include a copy of all college transcripts, professional certifications, course completion certificates, etc. List most recent education first.

PhD/Doctorate	
School Name:	
Degree Awarded:	Graduation Date:
Masters	
School Name:	
Degree Awarded:	Graduation Date:
Baccalaureate	
School Name:	
Degree Awarded:	Graduation Date:
Associates	
School Name:	
Degree Awarded:	Graduation Date:

Professional Certifications

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):	Year(s)	Month(s)
MOS/AOC/FA:		Discharge Type:	

EMPLOYMENT DATA

List contact information for your last three (3) employers.

1. **Company Name:**			
Position Title:		Supervisor Name:	
Phone:	Email:	Dates of Employment:	TO
2. **Company Name:**			
Position Title:		Supervisor Name:	
Phone:	Email:	Dates of Employment:	TO
3. **Company Name:**			
Position Title:		Supervisor Name:	
Phone:	Email:	Dates of Employment:	TO

ACKNOWLEDGMENT

I certify the information provided in this application form/packet is true, accurate, and complete. I understand that providing false or fraudulent information may be grounds for non-selection or removal from program participation, if determined prior to commissioning. Once commissioned, provision of false or fraudulent information during this application process may lead to disciplinary action or discharge from military service. Furthermore, I authorize the verification of all information provided in this application form and packet.

Signature*:*	Date: