U.S. ARMY NATIONAL GUARD CYBER OFFICER DIRECT COMMISSIONING APPLICATION



APPLICATION PACKET CHECKLIST:

- 1. Completed/signed Cyber Officer Direct Commissioning Application.
- 2. Up-to-date resume/curriculum vitae.

3. Diploma and college/university 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 ineligible.
- > 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 receipt of your packet is not confirmed as noted, please feel free to follow-up in a separate email.
- If your education and experience align well with specified requirements, you will be contacted to further discuss the process. Thank you for your interest in the Army National Guard Cyber Officer direct commissioning opportunity!

Send completed application packet to the following mailbox:

NG.NCR.NGB-ARNG.LIST.CYBER@ARMY.MIL

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BASIC INFORMATION

Demographic questions are optional, but your answers assist us with processing your application. Sign and date the form when complete.

First:	-irst:		MI:		Last:		
Sex:	Age:	Ra	Race/Ethnicity:				
Current City:	urrent City:		State:				
Phone:		Email:					
Citizenship Status: [Note: Non-U.S. citizens a	nd dual citizens are ineligible fo	or this p	orogram.]			
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 yo	u willing to submit to a	and p	oass a	control	led substance test?	YES	NO
Do you currently hold a valid security clearance? YES, level: NO				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.]							

COMMISSIONING PATH

I am seeking commission into:

I am applying for:

[Note: Acceptance for direct commissioning will be based on meeting specific education and experience requirements combined with position availability at the State Army National Guard level.]

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:		Supe	ervisor Name:		
Phone:	Email:		Dates of Employment:	ТО	
2. Company Name:					
Position Title:		Supe	ervisor Name:		
Phone:	Email:		Dates of Employment:	ТО	
3. Company Name:					
Position Title:		Supe	ervisor Name:		
Phone:	Email:	•	Dates of Employment:	ТО	

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: