| | | | FUTU | | | PRE-EX | | | | ST | | | | | | | |
|------------------------------------|----------------|--|--|--|------------|------------|-------------|-------------|------------|------------|------------|----------|---------|--------|------|--|--|
| 1. NAME: | | 2. SSN: | | | | | | | | | | | | | | | |
| 3. MOS AND OPTION: | | 4. SHIP DATE: | | | | | | | | | | | | | | | |
| 5. RECRUITER OR SC: | | | | | | | - | 6. RSID: | | | | | | | | | |
| o. REGROTTER OR GO. | | | SE(| SECTION I - MANDATORY SHIP ITEMS AND/OR TASKS | | | | | | | | | | | | | |
| SC INITIALS | DATE CO | MPLETED | | , IION I - | WANDA | IOKI SII | IF ITEWIS | | | | | | | | | | |
| SC INITIALS | DATE CO | INPLETEL | _ | ITEM OR TASK SF 1199A (Direct Deposit Sign-Up Form) (must have ATM card or checkbook to access account) | | | | | | | | | | | | | |
| | | | SF | 1199A (D | irect Dep | osit Sign- | Up Form) | (must ha | ave ATM o | ard or che | eckbook to | access a | ccount) | | | | |
| | | | Est | ablish AK | O accour | nt (Future | Soldier (F | S) will ma | intain pas | sword) | | | | | | | |
| | | | | USAREC Form 1134 (United States Army Future Soldier Identification Card (Regular Army)) or USAREC Form 1134-1 (United States Army Future Soldier Identification Card (Army Reserve)) | | | | | | | | | | | | | |
| | | | Pas | Pass physical fitness assessment | | | | | | | | | | | | | |
| | | | Push-ups Repetitions: Go No-Go | | | | | | | | | | | | | | |
| | | | Sit- | - | | Repetit | <u> </u> | | | Go | Ĺ | No-G | | | | | |
| | | | Rur | | | | Time: | | | Go | L | No-G | 0 | | | | |
| | | | Register for ARS-SMART (www.futuresoldiers.com/html/referrals.jsp) | | | | | | | | | | | | | | |
| | | | FS has all items on packing list (no more, no less) | | | | | | | | | | | | | | |
| | | Current and valid driver's license: Expiration date: | | | | | | | | | | | | | | | |
| | | | DA Form 5500 (Body Fat Content Worksheet (Male)) or DA Form 5501 (Body Fat Content Worksheet (Female (if applicable) | | | | | | | | | | | nale)) | | | |
| | | | Acti | Active Army and Reserve Components Referral (see sec IX) (if applicable) | | | | | | | | | | | | | |
| | | | Tra | Transportation to MEPS verified | | | | | | | | | | | | | |
| | | | Mar | Marriage license (if applicable) | | | | | | | | | | | | | |
| | | | Dep | Dependent birth certificate(s) (if applicable) | | | | | | | | | | | | | |
| | | | Dip | Diploma (if applicable) | | | | | | | | | | | | | |
| | | Accept | Nat | Naturalization packet (N400 and N426) (if applicable) | | | | | | | | | | | | | |
| | | Decline | FS' | FS's Signature and Date: | | | | | | | | | | | | | |
| | | | Oth | Other documents, including MOS specific (if applicable) | | | | | | | | | | | | | |
| NOTES: | | | - | | | | | | | | | | | | | | |
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| | | | | | | - MANDA | | | | | | | | | | | |
| | * Place th | e date that | initial tra | ining occu | rs and the | sustainm | ent trainin | • • | nents in a | ccordance | with AR 3 | 50-1. | | | | | |
| | INITIAL | 30 | 60 | 90 | 120 | 150 | 180 | DAYS 210 | 240 | 270 | 300 | 330 | 360 | 390 | 420 | | |
| Antiterrorism (A) | | 33 | | | 1.20 | 100 | | 2.0 | 2.0 | 2.0 | | 000 | 000 | 1 | 1.20 | | |
| Army Suicide Prevention-ACE (A) | | | | | | | | | | | | | | | | | |
| CTIP (A) | | | | | | | | | | | | | | | | | |
| Sexual Assault Prev and Response | (A) | | | | | | | | | | | | | | | | |
| Equal Opportunity (SA) | | | | | | | | | | | | | | | | | |
| Prevention of Sexual Harassment (S | SA) | | | | | | | | | | | | | | | | |
| Resiliency Training (O) | | | | | | | | | | | | | | | | | |
| Global Assessment Test (GAT) (Q) | | | | | | | | | | | | | | | | | |
| Army Values and History (Q) | | | | | | | | | | | | | | | | | |
| Note: A = Annual; SA = Semiannual | ; O = Ongoing; | Q = Quarter | ly. | | | | | | | | | | | | | | |

| | | | | | | | | SEC | OITS | 1 111 - | TRAINI | NG | CYCLE | raini | NG | | | | | | | | | |
|---|--------------|--------------|----------|----------------------------|----------|----------|--------------|------------|---------------|---------|--------------------|-------|--------------------|------------------------------------|-------------|----------|--|--|------|-------------------|---------------|-------|----------|--|
| | | | | | | | | | | | | | | DA | | | | _ | | | | | | |
| | INI. | TIAL | - 3 | 30 | 6 | 60 | 9 | 90 | 1: | 20 | 150 |) | 180 | 2 | 10 | 240 | 270 | 30 | 0 | 330 | 3 | 60 | 390 | 420 |
| Military Time | | | | | | | - | | | | | | | _ | | | | | | | | | | |
| Phonetic Alphabet | ₩ | | <u> </u> | | _ | | _ | | _ | | - | | | _ | | | | _ | | - | _ | | | - |
| Rank Structure | | | | | | | | | | | | | | _ | | | | | | | | | | |
| Land Navigation | 1 | | | | | | | | _ | | | | | _ | | | | | | | | | | |
| Drill and Ceremonies | _ | | | | | | <u> </u> | | | | | | | 4 | | | | | | | | | | |
| General Orders | | | | | | | | | | | | | | | | | | | | | | | | |
| Risk Assessment | | | | | | | | | | | | | | | | | | | | | | | | |
| First Aid | | | | | | | | | | | | | | | | | | | | | | | | |
| Customs and Courtesies | | | | | | | | | | | | | | | | | | | | | | | | |
| Perform Voice Communication | | | | | | | | | | | | | | | | | | | | | | | | |
| Personal Recovery | | | | | | | | | | | | | | | | | | | | | | | | |
| AFTB Tier 1 | | | | | | | | | | | | | | | | | | | | | | | | |
| Financial Readiness | | | | | | | | | | | | | | | | | | | | | | | | |
| SECTION IV - DIAGNOSTIC APFT | | | | | | | | | | | | | | | | | | | | | | | | |
| *Diagnostic APFT will be administered | | | | | | | | | | | | | | | | | | | | | | | | |
| monthly to each FS | PF | A | 3 | 0 | 60 | | g | 90 120 | | 20 | 150 | | 180 | 21 | 0 | 240 | 270 | 300 | 0 | 330 | 36 | 30 | 390 | 420 |
| DATE | | | | | | | | | | | | | | | | | | | | | | | <u> </u> | |
| Push-Up: Repetitions/Score | \Box | | | | | | | | | | | | | | | | \Box | | | | | | | |
| Sit-Up: Repetitions/Score | $oxed{oxed}$ | | | | | | $oxed{oxed}$ | | | | | | | $oxed{oxed}$ | | | $oxed{oxed}$ | | | | $oxed{oxed}$ | | | |
| 2-Mile Run: Time | _ | | | | | | <u> </u> | | | | | | | | | | | | | | | | | ļ |
| APFT SCORE | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | SE | CTION | ۷ - | HT/WT | | | | | | | | | | | |
| | Phy | sical | 3 | 0 | 6 | 0 | 9 | 0 | 12 | 20 | 150 | | 180 | 21 | 0 | 240 | 270 | 300 | 0 | 330 | 36 | 0 | 390 | 420 |
| HT/WT (within standards) (Monthly) | | | | | | | | | | | | | | | | | | | | | | | | |
| HT/WT (BFM Weekly) | Phy | sical | W | K 1 | W | K 2 | W | K 3 | W | K 4 | WK | 5 | WK 6 | W | (7 | WK 8 | WK 9 | WK | 10 | WK 11 | ı wk | 12 | WK 13 | WK 14 |
| Male Neck Measurement | | | | | | | | | | | | | | | | | | | | | | | | |
| Male Waist Measurement | | | | | | | | | | | | | | | | | | | | | | | | |
| Male BFM | <u> </u> | | | | | | | _ | | | <u> </u> | | ļ | 1 | | | | | | L., | | | | <u> </u> |
| Female Neck Measurement | 1 | | | | | | | | | | | | | | | | | | | | | | | |
| Female Waist Measurement Female Hip Measurement | 1 | | | | | _ | | | | - | \vdash | | | - | | | + | + + | | | | | | + |
| Female BFM | + | | | | | | | <u> </u> | | | | | | + | | | + | + | | \vdash | _ | | | |
| HT/WT (BFM Weekly) | Phy | sical | \//k | (15 | \//k | (16 | ١٨/١ | C 17 | ۱۸/۱ | (18 | WK 1 | 10 | WK 20 | WK | 21 | WK 22 | WK 23 | WK | 24 | WK 25 | 5 WK | . 26 | WK 27 | WK 28 |
| Male Neck Measurement | 1y | Jicai | *** | T | *** | I | - vvi | T | *** | I | - WIK I | | WICZO | - WIN | 21 | WICZZ | VICES | WIK | 27 | WICZS | , vvi | 120 | VVICZ | WIK 20 |
| Male Waist Measurement | \vdash | | | \vdash | | \vdash | | | | | \vdash | | | | _ | | + | + | | \vdash | | | | |
| Male BFM | 1 | | | <u> </u> | | <u> </u> | ┢ | _ | | | | | | | | | | | | | | | | |
| Female Neck Measurement | 1 | | | | | | | | | | | | | | | | T | | | | | | | |
| Female Waist Measurement | 1 | | | | | | | | | | | | | | | | | | | | | | | |
| Female Hip Measurement | | | | | | | | | | | | | | | | | | | | | | | | |
| Female BFM | | | | | | | | | | | L | | | | | | | | | | | | | |
| | | | | | | | | s | ECTI | ON V | I - LIFE | ST | YLE INVE | NTOR | Y | | | | | | | | | |
| LIEESTVI E INIVENTORY DATE | INIT | IAL | 3 | 0 | 60 |) | 9 | 0 | 12 | 20 | 150 | | 180 | 21 | 0 | 240 | 270 | 300 | | 330 | 36 | 0 | 390 | 420 |
| LIFESTYLE INVENTORY DATE | | | | | | | | | | | | | | | | | | | | | | | | |
| TIME IN DEP | 3(| 0 | 60 |) | 90 |) | 12 | 20 | 15 | 50 | 180 | | 210 | 24 | 0 | 270 | 300 | 330 |) | 360 | 39 | 0 | 420 | SCORE |
| (Mark the block that dictates the FS's time in DEP) | | | | | | | | | | | | | | | | | | | | | | | | |
| | FS C | rient | | MON | TH 1 | | | MON | TH 2 | | М | ION | TH 3 | | MON | TH 4 | МС | NTH 5 | | МС | ONTH 6 | | MON | TH 7 |
| FS FOLLOWUP (List followup type for each week | | | | | | | | | | | | | | 1 | | | | | | | | | | |
| within the month: T-Telephone; FT-Face-to-Face Tutorial; DF-DEP | | MON | TH 8 | | | MON | TH 9 | | | MON. | TH 10 | | МОМ | ITH 11 | | MON | TH 12 | '\ | MON. | TH 13 | | MON. | TH 14 | SCORE |
| Function) | | | | | | | | | | | | | | | | | | 1 1 | | | | | | |
| EDITORION NECES | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | | DIPLO | OM4 | | <u>_</u> | SSO | CIATES | \Box | BACHEL | ORS | l | | ASTE | RS. | SCORE |
| EDUCATION YEARS (Mark the appropriate education and completion level) | H | - 1 | | | | | ٠.٠ | ., | .5 | | 211 L | ~1417 | • | | | | + | ILL | 2110 | | 1417 | | | JOUNE |
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| TACTICAL/HOUSEHOLD SEGMENT | TA | CTICA | AL SE | GMEI | NT | SCC | RE | НС | DUSE | HOLD | SEGME | NT | sco | RE | CH. | ANGE/HO | JSEHOLD | SCORE CHANGE/EMPLOYN | | | YMENT | SCORE | | |
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| USAREC Form 1137 Rev 1 Oc | | | | | <u> </u> | | | | | | | | | | | | | | 丄 | | | | | age 2 of 3 |

| SECTION VII - FS ASSESSMENT SUMMARY | | | | | | | | | | | | |
|--|------------------|--------------|--------------------------------|--|----------------------------|--|--|--|--|--|--|--|
| Recruiter will conduct a holistic assessment summary of the FS with limited to the following focus areas: | in 30 days of s | shipping to | initial military training. Add | ress the FS's curre | ent status using, but not | | | | | | | |
| 1. Army Values 2. Training Competence 3. Bearing (physical a | nd emotional | capabilitie | s) 4. Leadership 5. Re | sponsibility/Account | tability (family-employer) | | | | | | | |
| | | | | | | | | | | | | |
| SECTION VIII - PROGRAM AND PROMOTION CERTIFICATION | | | | | | | | | | | | |
| I have reviewed the above FS's qualifications and hereby confirm and verify the readiness of the FS for initial military training and all mandatory documents are present. This is to certify that the FS has successfully completed all required mandatory and training cycle tasks and passed the Army Physical Fitness Test with a score of 180 or above and/or provided qualified referral(s) and is is not eligible for promotion in accordance with AR 601-210, paragraph 2-18. (Place "X" in the appropriate box). | | | | | | | | | | | | |
| STATION COMMANDER'S TYPED NAME AND SIGNATURE: DATE: | | | | | | | | | | | | |
| NOTES: | | | | ' | | | | | | | | |
| COMMANDING OFFICER'S TYPED NAME AND SIGNATURE: | DATE: | | | | | | | | | | | |
| SECTION IX - ACTIVE ARMY AND RESERVE COMPONENTS REFERRAL | | | | | | | | | | | | |
| PRIVACY ACT STATEMENT | | | | | | | | | | | | |
| AUTHORITY: Collection of the information requested and recorded on USAREC Form 1137, section IX, is authorized by Title 10, USC, Section 513, 3013(g)(3). PRINCIPAL PURPOSE: To provide such data as is requested by a U.S. Army recruiter and/or guidance counselor to contact, process, and enlist prospects for Army service. ROUTINE USES: a. Used by the recruiter to make contact with a prospective applicant for enlistment. b. Used by the guidance counselor, personnel officer, or administrative supply technician to verify that an applicant has enlisted in the FSTP, RA, ARNG, or USAR. c. Used by recruiting personnel to monitor the Regular Army and Reserve Components Referral Program and to formulate market data to determine recruiting trends. EFFECT OF NOT PROVIDING INFORMATION: The disclosure of the information requested is entirely voluntary. Failure to provide this information, however, may result in denial of referral credit to applicant or enlistee making the referral. | | | | | | | | | | | | |
| SPECIAL INSTRUCTIONS: Before collecting the information requested in Part I below from prospective applicants for enlistment, you must inform the prospective applicants of the uses for the information and the effect of not providing information as discussed in the Privacy Act Statement above. | | | | | | | | | | | | |
| PA | RT I: REFERE | RAL INFOR | MATION | | | | | | | | | |
| NAME | ssi | N | TELEPHONE | ENLIST DATE AND BRANCH: (completed by guidance counselor) | | | | | | | | |
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| PART II: REFERRAL ENLISTMENT CERTIFICATION Upon referral en enlistment date and branch of service in which the referral enlisted. A | _ | | · | | | | | | | | | |
| CERTIFICATION OF GUIDANCE COUNSELOR: I certify that the perso this form. | ns identified ir | n Part I abo | ve are bona fide referrals of | the person identifie | ed on the first page of | | | | | | | |
| NAME, RANK/GRADE, SSN: | _ | SIGNATU | RE AND DATE: | | | | | | | | | |