# **DEPARTMENT OF THE ARMY**



HQS, 3D U.S. INFANTRY REGIMENT (THE OLD GUARD) 201 JACKSON AVENUE JOINT BASE MYER-HENDERSON HALL, VA 22211

ANOG-REC 05 July 2023

MEMORANDUM FOR: Prospective Applicant

SUBJECT: Request for Assignment Instructions

Thank you for your interest in The Old Guard, "The Official Escort to the President". The following packet includes all the information necessary to be considered for selection and assignment to The Old Guard. The following criteria must be met for consideration:

Height:

**Males:** 5'-10" (70 inches) and above (waiver available) **Females:** 5'-8" (68 inches) and above (waiver available)

No Civil Convictions or UCMJ within three years

No Drug or Alcohol related incidents

Recommended ACFT Score of 420 (Recommend 480 or above for NCOs)

Must meet all Army height and weight standards and look like a Professional Soldier

No movement restrictive profiles, shaving profiles or haircut profiles

Must be a US Citizen

Must be Active Duty, Regular Army

Must have a stable financial background

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ANOG-REC 05 July 2023

SUBJECT: Candidate Checklist for The Old Guard

The purpose of this document is to assist the unit in preparing Soldiers for assignment to the 3d U.S. Infantry Regiment (The Old Guard), while providing one single document with appropriate attachments. A copy of this checklist must be emailed to The Old Guard. Failure to return this checklist will result in re-assignment of orders to the needs of the Army. Old Guard Candidates reporting for assignment must also have a copy of this signed Commander's checklist in his/her possession.

If you have any questions regarding the checklist or application process, feel free to call The Old Guard Recruiting at (703)851-1706.

### PERSONAL DATA SHEET

# DATA REQUIRED BY THE PRIVACY ACT

AUTHORITY: Title 5 United States Code, Section 301

**PRINCIPAL PURPOSE:** To evaluate applicants potential for assignment to the 3d U.S. Infantry Regiment (The Old Guard).

**ROUTINE USES:** To aid The Old Guard Commander or his representative in determining if applicant is qualified for assignment under the provisions of AR 614-200. **DISCLOSURE:** Providing information is voluntary. Failure to provide all or part of the requested information may prevent a decision as to the applicant's eligibility.

Name:			SSN:		
Mailing Add	res <u>s:</u>				
Email (Millita (Personal) _ Phone: ()					
MOS:F	Rank:	BASD:	ETS:		
ACFT:	F	Height (Inches):	Weight:		
GT Score:					
SIZES					
Waist:	Blouse: _	Hat:	Shoe:	Glove:	
Marital Status:		Number of Depend	ents:	MACP: Y / N	

L	AST:		FIRST:	MI:	SSN:	RANK:
		Ple	ase answer all	l questions	and explai	n if necessary.
	_			-		,
1. A	re you a C YES	NO NO	of the United S Explain:	States of Ar	nerica?	
2. D	o you hold YES		zenship from a Explain:	another cou	ıntry?	
3. Is	your Spo YES	use a NO	Citizen of anot Explain:	her country	/?	
	•	e 15, D	erogatory Cou			ken against you? (Courts
			d any Alcohol ore or after en Explain:			nts to include arrests by civilian
6. H	ave you e YES		perimented or Explain:	used Drug	s?	
7. H	ave you e YES	ver red NO	ceived Counse Explain:	eling for Alc	ohol or Dru	g addiction or abuse?
8. H	ave you e YES	ver ha NO	d a lien placed Explain:	l against yo	our property	?
9. H	as a Colle YES		Agency ever co Explain:	ontacted yo	ou to pay a l	oill?
E C	A. Able to B. Unable C. If unable	meet o to mee e to me	rent Financial obligations. et financial obli eet financial ob 30 Days	gations. oligations, ł		ind are you? 120 Days
		ever n	nissed Alimony Explain:			
12. \			ntentionally hai	rm you pers	sonally or p	rofessionally?

13. Do you now or have you ever worn earrings or gauges in your ears? YES NO Explain:

14. Do you now, or have you ever had problems with your knees or back? YES NO Explain:

15. If you wear Glasses, will you be able to perform Ceremonies wearing Contact Lenses or nothing at all?

YES NO Explain:

16. Do you understand the High Cost of Living on and off base in the National Capital Region?

YES NO Explain:

17.Do you understand that you must have at least 36 Months remaining on your current Enlistment upon assignment approval for The Old Guard or you may be required to Re-enlist or Extend to be eligible for this assignment prior to your departure from your current assignment?

YES NO Initials

18. Do you have any Tattoos or other Markings on your body? YES NO Please see Tattoo form.

19. Do you understand that if you are accepted to The Old Guard, it is your responsibility to inform us of any Physical Changes- (temporary or permanent profiles (to include shaving and weather-related), MEB, etc.) prior to your arrival as you may not meet the physical requirements to perform your duties here?

YES NO Explain:

- 20. Soldiers who received an Enlistment Bonus must have the following documents in order to ensure the timely processing of their Bonus. DD Form 4/1, 4/2, 4/2, DA Form 1966/1-6, DA Form 3286/1-7, AIT Certificate, and Orders Awarding your MOS. INITIALS
- 21. Do you now or have you ever had a "Shaving or Haircut Profile"? YES NO Explain:

22. Do you have a documented speech impediment?

YES NO Initials

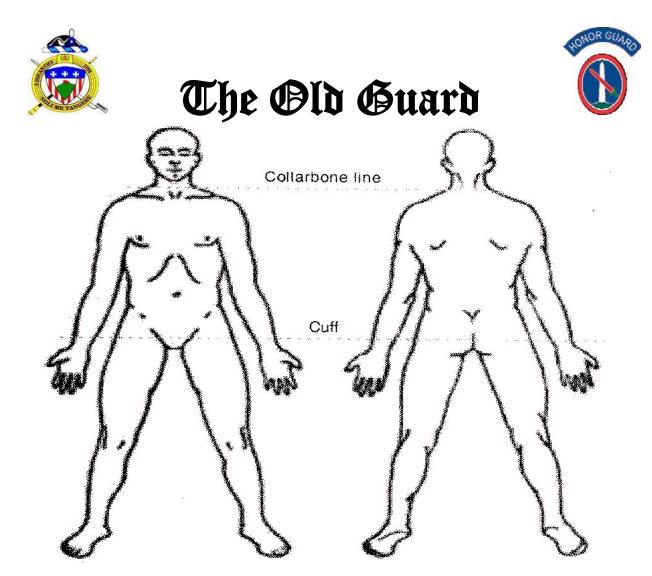
23. Do you have any concerns performing missions such as Military Funerals in Arlington National Cemetery where our fallen members are laid to rest?

YES NO Explain:

Answer Yes or No (If Yes, Explain)
24. Record of misconduct to include the following offenses:
(a) Driving under the influence (DUI)
(b) Assault (other than subordinate, spouse, or child which is a permanent
disqualification)(c) Any drug related offense
(c) Any drug related offense
(d) Larceny/theft
(d) Larceny/theft(e) Traffic violations with six or more points accessed
(f) Court-martial convictions
25. Do you have any profiles to include no standing, running or marching?
YES NO Explain:
26. It is highly recommended that Soldiers traveling with Family members arrive
Monday-Friday between the hours of 0700-1600 to better facilitate lodging.
Transportation of your household goods can be coordinated with Transportation
at 703-614-7190 or 703-806-4900. During your PCS move, if there are any issues,
please call the Regimental Staff Duty at 703-696-3003. Initials:
27. In the last 12 months where have you heard about the Old Guard, check all that
apply:
Social Media EmailWeb Site Other (explain)
certify that my statements on this form, and on any
attachments to it, are true, complete, and correct to the best of my knowledge and belief
and are made in good faith. I have carefully read the foregoing instructions to complete
this application. I understand that a knowing and willful false statement can be punished
under Article 107, UCMJ. I understand that intentionally withholding, misrepresenting or
falsifying information may have a negative effect on my career opportunities.
Additionally, I authorize disclosure of my health information contained in my AHLTA
electronic file to Physicians Assistants assigned to the 3d U.S. Infantry Regiment in
order to determine my medical fitness for assignment to the 3d U.S. Infantry Regiment.
Signature:
7 1 . 1d . 11 d . 1
I understand that I have the right to revoke this authorization at any time but that any revocation
may affect the screening process for acceptance into the 3d U.S. Infantry Regiment. I understand

that authorizing disclosure of health information is voluntary and that I can refuse to sign this

authorization.



In the diagram above annotate with a number where your Tattoo is located and provide a brief description of the Tattoo below with the corresponding number of Tattoo.

1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	

# REPLY TO ATTENTION OF

# **DEPARTMENT OF THE ARMY**

HQS, 3D U.S. INFANTRY REGIMENT (THE OLD GUARD) 201 JACKSON AVENUE JOINT BASE MYER-HENDERSON HALL, VA 22211

# **VOLUNTEER STATEMENT FOR ASSIGNMENT**

TO: 3D U.S. INFANTRY REGIMENT (The Old Guard)

I hereby volunteer for assignment with the 3D U.S. Infantry Regiment, (The Old Guard) in accordance with AR 614-200, Chapter 8, Paragraph 8-7. I understand that The Old Guard's mission requires the highest standards of discipline, mental and physical readiness, and professionalism. I understand that my assignment to the 3d U.S. Infantry Regiment (The Old Guard) is contingent upon me meeting all prerequisites including successful completion and approval of a Presidential Support Duty Clearance. If, through my own fault I fail to meet or maintain the required physical, professional, or suitability standards, or become disqualified in any way prior to or during my tour of duty with The Old Guard, I may be reassigned in accordance with the needs of the Army. I understand that this assignment is a thirty-six (36) month tour, and I will extend or reenlist to meet this requirement. I volunteer of my own free will and good faith and will uphold the standards of the regiment to the best of my abilities. I also understand that if I become unable to perform my duties I may be reassigned within the needs of the Army.

APPLICANT'S NAME (print):	
SIGNATURE:	
SSN #:	
DATE:	