

U.S. ARMY ROTC SCHOLARSHIP ACCEPTANCE/DECLINATION STATEMENT AND PMS VALIDATION

OMB Control Number: 0702-XXXX
OMB Expiration Date: XX/XX/XXXX

For use of this form, see USACC Pam 145-1, the proponent agency is ATCC-ROI

The public reporting burden for this collection on, 0702-XXXX, is estimated to average 9 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc.alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB Control Number.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

Authority: Title 10 USC sections 2101 and 2107.
Principal Purpose(s): To notify ROTC Cadet Command that winner accepts or declines a scholarship offer. Notifies which institution winner will attend and reason if scholarship offer is declined.
Routine Uses: To maintain count of acceptances/declinations to enable ROTC Cadet Command to make awards to alternates. Information on the institution is obtained to identify enrollment and allocation of funds to pay costs. Information is also used to mail medical forms to be included in the Cadet personnel file. Information on why recipient declines is maintained for statistical studies of enrollment trends.
Disclosure: Information is used by ROTC Cadet Command and to provide specific data to ROTC Regions and PMS. Mandatory or voluntary disclosure and effect on individual not providing information - all data is mandatory. Individuals who do not notify ROTC Cadet Command of acceptance will lose their scholarship.

Bde	HOST SCHOOL	ACADEMIC SCHOOL
-----	-------------	-----------------

3. NAME OF WINNER (Last Name, First Name, MI)	4a. SSN (Last 4 digits)	b. Cadet ID/Applicant ID
---	-------------------------	--------------------------

5a. SCHOLARSHIP CONTROL NUMBER
(A Scholarship offered without a Scholarship Control Number is unauthorized and not valid.)

b. GRFD CONTROL NUMBER (if applicable)

6. SCHOLARSHIP TYPE:

Basic Camp	Graduate	Language	URBAN	STEM	Nurse
<u>Campus Based</u>	2-Year Campus Based 2-Year Advanced Designee (AD) 3-Year (or 2.5-Year) Campus Based 3-Year Advance Designee (AD) 4-Year (or 3.5-Year) Campus Based				
<u>GRFD</u>	2-Year GRFD-ARNG/USAR 2-Year Ike Skelton Scholarship 2-Year Dedicated ARNG/USAR 3-Year (or 2.5-Year) Dedicated ARNG/USAR				
<u>Green to Gold</u>	2-Year Green to Gold 3-Year Green to Gold 4-Year Green to Gold				
<u>National</u>	4-Year High School 3-Year Advance Designee (AD)				

PMS VALIDATION OF 3- AND 2-YEAR ADVANCE DESIGNEES (TRANSCRIPT MUST BE INCLUDED FOR VALIDATION)
Validation must be completed by 1 July the summer before the Cadet is scheduled to contract IAW CC PAM 145-1, 2-2h(7)

1. GPA, Academic Cumulative _____ 2. GPA, ROTC Cumulative _____
 No more than 4.0 will be entered. If other than a 4.0 scale, convert using the table in USACC Reg 145-1.

3. MAJOR SUBJECT: _____
 ACADEMIC MAJOR CODE : _____

4. STATUS OF MEDICAL QUALIFICATION:
 Qualified
 Has Changed (Physical submitted to DoDMERB)

5. PMS RECOMMENDATION:
 Recommended
 Not Recommended

6. PROJECTED GRADUATION DATE (MMYYYY):

7. SCHOLARSHIP AWARD DATE (YYYYMMDD):

8. PMS REMARKS:

_____ PMS SIGNATURE _____ DATE (YYMMDD)

7. DECISION: ACCEPT DECLINE

8. REASON FOR DECLINATION:

1 - Commitment	2 - Academic Major Restriction
3 - Non-Military Scholarship	4 - Other Military Scholarship
5 - ROTC Too Time Consuming	6 - No Longer Interested
7 - Other (Please explain)	

I, the undersigned, hereby acknowledge receipt of notification of my selection for the award of an Army ROTC Scholarship. In accepting this scholarship I understand that I will obtain a degree in the academic major indicated on my application/contract or I may lose my scholarship if I change to another academic discipline without prior written consent of the Professor of Military Science.

9. CADET'S SIGNATURE	10. DATE
----------------------	----------