



# UNITED STATES NAVAL SEA CADET CORPS RECRUIT TRAINING COMMAND NEW ENGLAND

10 July 2024 – 20 July 2024 · Fort Devens, Massachusetts

[www.newenglandseacadets.org/training rtc](http://www.newenglandseacadets.org/training rtc)

LAST NAME

FIRST NAME

**To secure a Recruit billet at Recruit Training, submit the following:**

- ☐ A Magellan training request via the Parent Portal

**Once your Cadet's training status has been set to "Confirmed" in Magellan:**

- ☐ A \$300 cashier's check or money order made out to "**Sea Cadets TG-NE-02**". **personal checks will not be accepted. Please include the Magellan Invoice.** This identifies what Cadet and Unit we are receiving payment from. Contact your unit Officers for assistance with creating an invoice.
- ☐ A Completed Fort Devens Visitor Request Form for **ANY NON ACTIVE/RESERVE/RETIRED MILITARY ADULT (AGE 18 AND UP)** wishing to access Fort Devens for drop-off, pick-up and/or graduation. Including a copy of a valid driver's license or state / government issued ID which is located on page 2 of the access form.

*Warning: Billets cannot be "reserved" – all billets are first-come, first-served, and will be finalized as "approved" only upon receipt of **ALL** documents.*

## Notes for Unit Commanding Officers:

- Please review paperwork with parents for accuracy and completion. Please do your best to address questions and concerns at the unit level.
- **Payments and Invoice** must be mailed to the Training Group Director  
**Sea Cadets TG-NE-02**  
**12 Alpine Run Rd**  
**Kingston, MA 02364**
- This packet, which includes the Fort Devens Visitor Request Forms shall be **scanned** and uploaded via the "Upload to COTC" function in Magellan.
- Staff Cadets and Escort Officers must also register in Magellan for ND-MA-2401L to cover the 2 staff training days prior to Recruit arrival.
- Staff Cadets must fill out and email the Staff Cadet Application below to [rtc-ne@seacadets.org](mailto:rtc-ne@seacadets.org)

**DEADLINE FOR STAFF CADET APPLICATIONS: MONDAY 13 MAY 2024**  
**DEADLINE FOR RECRUIT PAPERWORK: MONDAY 10 JUNE 2024**

# REQUEST FOR FORT DEVENS ACCESS CONTROL VISITORS PASS

**PRIVACY ACT ADVISEMENT:** The information requested is for the purpose of granting access to the Fort Devens Installation. The SSN, required for record accuracy, is requested pursuant to EO 9397. All information that contains PII is protected as required.

## 1. APPLICANT INFORMATION:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

SSN: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ DL State: \_\_\_\_\_

Are you a Registered Sex Offender? Yes No Any felony convictions? Yes No Are you a U.S. Citizen? Yes No

Place of Birth (City/State or Country): \_\_\_\_\_ Date of Birth (MM/DD/YY): \_\_\_\_\_ Gender: M F

2. REASON FOR VISIT: Non-DoD Contractor/Vendor Foreign National Training / Appointment  
Family Care Provider Drill / Muster Other Sea Cadet Training

Have you received a Visitor Pass from Fort Devens within the past year? Yes No

How many days are you requesting? (Select all that apply): Staff Check-In 10July2024 Recruit Check-In 12July2024 Graduation 20July2024 Escort Officers / 18yo Staff Cadets 10-20July2024

3. BUILDING NUMBER VISITING: BLDG 675/676 POC NAME: LT Ruben A. Jollie, NSCC POC PHONE #: (518) 944-5145

## 4. APPLICANT CERTIFICATION:

1. I understand that I must give Fort Devens Police consent to an initial and periodic background screenings prior to and after the issuance of an installation access pass. Failure to do so will result in the termination of the application process. I further understand that these background screenings will determine my eligibility for access and continued access during the term of my requested visit.
2. I understand that my access may be revoked at anytime without reason or notice.
3. I understand that I must properly care for my pass to prevent damage, or unnecessary wear, loss or theft.
4. I understand that I must immediately report any lost, damage or stolen pass to the Fort Devens Police.
5. All the information provided above is true and accurate and I have read all my responsibilities as an applicant for access to Fort Devens and its surrounding facilities.

\_\_\_\_\_  
(Applicant's Printed Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

## SECTION BELOW IS FOR USE BY THE INSTALLATION ACCESS CONTROL OFFICE ONLY

5. ISSUING OFFICIAL: APPROVED / ACCESS DENIED

Pass #: \_\_\_\_\_

Vetting results: Renewal \_\_\_\_ NCIC Hit(s) \_\_\_\_ NIR \_\_\_\_

Expiration Date: \_\_\_\_\_

Escort Required: Yes \_\_\_\_ No \_\_\_\_

NCIC Hit(s) Charges: \_\_\_\_\_

FBI: \_\_\_\_\_

Category Letter for Access Denial: \_\_\_\_\_

SID: \_\_\_\_\_

Access Denial Charge(s): \_\_\_\_\_

SID: \_\_\_\_\_

\_\_\_\_\_  
(Issuing Official's Printed Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

Ensure you provide a **CLEAR** copy of a Driver's license or State/Government issued ID card. It is recommended that you use a physical scanner/copier or

**Android Users:** Adobe Scan app (Free)

**Iphone:** Scan documents function in Notes

If you must take a photo see below for guidelines. **\*\*License information is blurred for example only. DO NOT do this to your actual copy\*\***



## Recruit Training Command New England – Staff Cadet Application

See [www.newenglandseacadets.org/training/rtc](http://www.newenglandseacadets.org/training/rtc) for more information and Standard Operating Procedures.

E-mail this form to: [rtc-ne@seacadets.org](mailto:rtc-ne@seacadets.org) **Subject:** RTC-NE 2024 - Last Name, First Initial - Staff Application

### PERSONAL INFORMATION

Last			First		M.I.	Cadet Email	
Rate	Date of Birth	Age	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Home Phone		Cadet Cell Phone	T-Shirt Size
Home Unit			Region	Home Address, City, State, Zip			

### LEADERSHIP & TRAINING EXPERIENCE

Primary Billet at Home Unit		Other Billets Held at Home Unit	
POLA Completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	When did you complete POLA?	Where did you attend POLA?	POLA Eval Score? If evaluated _____ out of _____

Provide details on other NSCC Advanced Trainings you have attended, starting with the most recent and working backwards

NSCC Advanced Training	Location	Year	Billet Held (list "Student" if you didn't hold a staff billet)

### ADDITIONAL QUALIFICATIONS – ATTACH DOCUMENTATION

☐ CPR ☐ CPR/AED ☐ First Aid ☐ First Responder ☐ Lifeguard ☐ EMT-B ☐ EMT-I ☐ EMT-P

### POSITION REQUESTED – See RTC-NE Standard Operating Procedures §3.2 & §3.3 for descriptions of cadet staff billets

First Choice:	
Second Choice:	
Third Choice:	

On the following sheet answer the following questions in 300 words or less:

- 1) List and explain what you think are the five most important goals for our recruits at RT.
- 2) Explain why you want to serve on staff at RT, and how you think you can contribute to the goals you listed.

Cadet Name	Cadet Signature	Date
------------	-----------------	------

### COMMANDING OFFICER'S ENDORSEMENT

Do you feel this cadet is mature enough to staff RTC-NE? ☐ Yes ☐ No Please explain (attach a separate sheet if necessary):

What type of billet do you recommend this cadet for (Military Training Staff, Logistics, Security, Medical, etc.)? Please explain:

CO Email	CO Daytime Phone	CO Evening Phone
Commanding Officer Name	Commanding Officer Signature	Date

