



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

REPLY TO  
ATTENTION OF

ANOG-REC

MEMORANDUM FOR: Prospective Applicant

Thank you for your interest in The Old Guard, “The Official Escort to the President”. The following packet includes all of 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

**Females:** 5-8’ (68 inches) and above

Minimum GT Score of 110 (Waivable based on Whole-Soldier Concept)

**No Civil Convictions or UCMJ**

No Drug or Alcohol related incidents

**Minimum PT Score of 230 (Recommend 270 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**

Deployed within the last 36 months is preferred

**Must have a stable financial background**

**\*Exceptions are made for EXCEPTIONAL SOLDIERS.**

**Please email a complete packet.**

**Packets that are missing any of the REQUIRED information will be discarded. A complete packet will possess the following:**

## **PACKET CHECKLIST**

- \_\_\_ DA Photo (Digital Photo in the APFT Uniform if deployed.)
- \_\_\_ ERB
- \_\_\_ Two Letters of Recommendation (E-4 and below only by Platoon Sergeant and above)
- \_\_\_ Last three NCOER's (CSM/LTC Letters of Recommendation if less than 2 Years of NCOERs exist).
- \_\_\_ Height and Weight Statement filled out by a PA for ALL Soldiers (DA Form 5500)
- \_\_\_ APFT Scorecard (DA Form 705) signed by 1SG/Commander
- \_\_\_ Completed questionnaire and signed Volunteer Statement
- \_\_\_ Completed DA Form 4187 signed by COL or higher (when in a FENCED unit)

If you have any questions regarding the application or application process feel free to call The Old Guard Recruiting Office at COMM (703) 696-3007 or DSN 426-3007.

Hector Milian  
SFC, USA  
Recruiting NCOIC



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

REPLY TO  
 ATTENTION OF

ANOG-REC

SUBJECT: Unit Commander's 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 either be emailed or mailed to The Old Guard before orders are requested.** 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 office at COMM (703) 696-3007 or DSN 426-3007

**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: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Unit Mailing Address: \_\_\_\_\_

Email (AKO) \_\_\_\_\_ (Personal) \_\_\_\_\_

Phone(W): ( \_\_\_\_\_ ) \_\_\_\_\_ MOS: \_\_\_\_\_ Rank: \_\_\_\_\_

BASD: \_\_\_\_\_ ETS: \_\_\_\_\_ Race \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Last PT Score: \_\_\_\_\_ GT Score: \_\_\_\_\_

SIZES

Waist: \_\_\_\_\_ Blouse: \_\_\_\_\_ Hat: \_\_\_\_\_ Shoe: \_\_\_\_\_  
 Glove \_\_\_\_\_

Marital Status: \_\_\_\_\_ Number of Dependents: \_\_\_\_\_ MACP: \_\_\_\_\_

LAST NAME

FIRST

MI

SSN

RANK

**Please answer all questions and explain if necessary.**

1. Are you a Citizen of the United States of America?  
 YES  NO Explain: \_\_\_\_\_
2. Do you hold a Citizenship from another country?  
 YES  NO Explain: \_\_\_\_\_
3. Is your Spouse a Citizen of another country?  
 YES  NO Explain: \_\_\_\_\_
4. Have you ever had any Military Disciplinary actions taken against you? (Court Martial, Article 15, Derogatory Counseling Statement)  
 YES  NO Explain: \_\_\_\_\_
5. Have you ever had any Alcohol or Drug related incidents to include arrests by civilian authorities even before or after enlistment into the Army?  
 YES  NO Explain: \_\_\_\_\_
6. Have you ever experimented or used Drugs?  
 YES  NO Explain: \_\_\_\_\_
7. Have you ever received Counseling for Alcohol or Drug addiction or abuse?  
 YES  NO Explain: \_\_\_\_\_
8. Have you ever had a lien placed against your property?  
 YES  NO Explain: \_\_\_\_\_
9. Has a Collection Agency ever contacted you to pay a bill?  
 YES  NO Explain: \_\_\_\_\_
10. What is your current Financial Status?
  - A. Able to meet obligations. \_\_\_\_\_
  - B. Unable to meet financial obligations. \_\_\_\_\_
  - C. If unable to meet financial obligations, how far behind are you?  
30 Days \_\_\_\_\_ 60 Days \_\_\_\_\_ 90 Days \_\_\_\_\_ 120 Days \_\_\_\_\_
11. Have you ever missed Alimony or Child Support Payments?  
 YES  NO Explain: \_\_\_\_\_
12. Do you have any Enemies? (Someone who would pursue harming you)  
 YES  NO Explain: \_\_\_\_\_

13. Do you now or have you ever worn earrings or gauges in your ears?

YES NO Explain: \_\_\_\_\_

13. Do you now, or have you ever had Problems with your Knees or Back?

YES  NO Explain: \_\_\_\_\_

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

YES  NO Explain: \_\_\_\_\_

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

YES  NO Explain: \_\_\_\_\_

16. Do you understand that you must have at least (E-4 and above 36 Months / E-3 and below 30 Months) remaining on your current Enlistment upon your arrival to The Old Guard or you will be required to Re-enlist or Extend to be eligible for this assignment prior to your departure from your current assignment?

YES  NO Initials \_\_\_\_\_

17. Do you have any Tattoos or other Markings on your body? Are any below the wristbone or above the collarbone?

YES  NO Please see Tattoo form.

18. Do you understand that if you are accepted to the Old Guard, it is your responsibility to inform us of any Physical Changes prior to your arrival as you may not meet the physical requirements to perform your duties here?

YES  NO Explain: \_\_\_\_\_

19. 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 \_\_\_\_\_

20. Do you now or have you ever had a "Shaving or Haircut Profile"?

YES  NO Explain: \_\_\_\_\_

**21. 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: \_\_\_\_\_**

SUBJECT: Unit Commander's Candidate Checklist for The Old Guard

22. Documented speech impediment?

YES  NO Initials \_\_\_\_\_

Yes No

23. 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 \_\_\_\_\_

(d) Larceny/theft \_\_\_\_\_

(e) Traffic violations with six or more points assessed \_\_\_\_\_

(f) Court-martial convictions \_\_\_\_\_

24. Do you have an issue / problem performing missions such as Military Funerals in Arlington National Cemetery where our fallen members are laid to rest?

YES NO Explain:

25. Do you have a history of falling out of formation or passing out?

YES NO Explain:

26. Do you have any profiles to include no standing, running or marching?

YES NO Explain:

27. In the last 12 months where have you heard about the Old Guard, check all that apply:  
Stars and Stripes \_\_\_\_\_ Email \_\_\_\_\_ Face Book \_\_\_\_\_ Web Site \_\_\_\_\_ Other (explain) \_\_\_\_\_

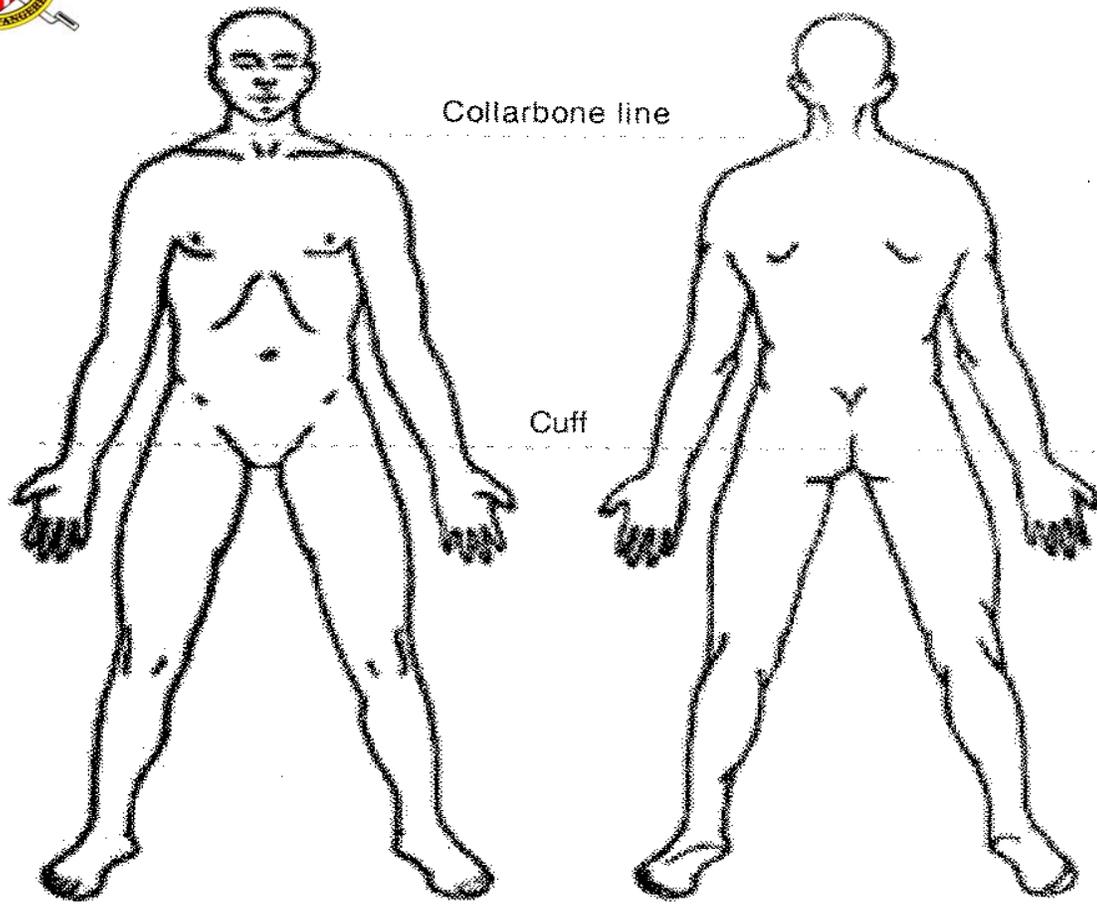
I \_\_\_\_\_ certify that my statements on this form, and on any attachments to it, are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I have carefully read the foregoing instructions to complete this application. I understand that a knowing and willful 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: \_\_\_\_\_

*I understand that I have the right to revoke this authorization at any time but that any revocation may effect the screening process for acceptance into the 3d U.S. Infantry Regiment. I understand that authorizing disclosure of health information is voluntary. I can refuse to sign this authorization.*



# The Old Guard



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. \_\_\_\_\_



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

REPLY TO  
ATTENTION OF

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



**PERSONNEL ACTION**

For use of this form, see AR 600-8-6 and DA PAM 600-8-21; the proponent agency is ODCSPER

**DATA REQUIRED BY THE PRIVACY ACT OF 1974**

**AUTHORITY:** Title 5, Section 3012; Title 10, USC, E.O. 9397.

**PRINCIPAL PURPOSE:** Used by soldier in accordance with DA PAM 600-8-21 when requesting a personnel action on his/her own behalf (Section III).

**ROUTINE USES:** To initiate the processing of a personnel action being requested by the soldier.

**DISCLOSURE:** Voluntary. Failure to provide social security number may result in a delay or error in processing of the request for personnel action.

1. THRU (Include ZIP Code) Commander 3D U.S. INF REGT (The Old Guard) 201 Jackson Ave Fort Myer, VA 22211	2. TO (Include ZIP Code) Commander, HRC-Fort Knox ATTN: AHRC-EPA-I, The Old Guard LNO 1600 Spearhead Division Avenue Fort Knox, KY 40122	3. FROM (Include ZIP Code) YOUR CURRENT BATTALION ADDRESS
---	--	--

**SECTION I - PERSONAL IDENTIFICATION**

4. NAME (Last, First, MI) YOUR INFORMATION HERE	5. GRADE OR RANK/PMOS/AOC YOUR RANK AND MOS HERE	6. SOCIAL SECURITY NUMBER 123-45-6789
--	---	--

**SECTION II - DUTY STATUS CHANGE (AR 600-8-6)**

7. The above soldier's duty status is changed from \_\_\_\_\_ to \_\_\_\_\_  
effective \_\_\_\_\_ hours, \_\_\_\_\_

**SECTION III - REQUEST FOR PERSONNEL ACTION**

8. I request the following action: (Check as appropriate)

<input type="checkbox"/> Service School (Enl only)	<input type="checkbox"/> Special Forces Training/Assignment	<input type="checkbox"/> Identification Card
<input type="checkbox"/> ROTC or Reserve Component Duty	<input type="checkbox"/> On-the-Job Training (Enl only)	<input type="checkbox"/> Identification Tags
<input type="checkbox"/> Volunteering For Oversea Service	<input type="checkbox"/> Retesting in Army Personnel Tests	<input type="checkbox"/> Separate Rations
<input type="checkbox"/> Ranger Training	<input type="checkbox"/> Reassignment Married Army Couples	<input type="checkbox"/> Leave - Excess/Advance/Outside CONUS
<input type="checkbox"/> Reassignment Extreme Family Problems	<input type="checkbox"/> Reclassification	<input type="checkbox"/> Change of Name/SSN/DOB
<input type="checkbox"/> Exchange Reassignment (Enl only)	<input type="checkbox"/> Officer Candidate School	<input checked="" type="checkbox"/> Other (Specify)
<input type="checkbox"/> Airborne Training	<input type="checkbox"/> Asgmt of Pers with Exceptional Family Members	Assignment to The Old Guard

9. SIGNATURE OF SOLDIER (When required)	10. DATE (YYYYMMDD)
---	---------------------

**SECTION IV - REMARKS (Applies to Sections II, III, and V) (Continue on separate sheet)**

- Request assignment instructions to the 3D U.S. Infantry Regiment (The Old Guard)
- I understand that if I am accepted to The Old Guard I will incur a service remaining requirement of 36 months upon arrival to Joint Base Myer-Henderson Hall.
- I request that any stabilization incurred from redeployment be waived in order to comply with immediate assignment instructions to The Old Guard.
- I have been on station here at \_\_\_\_\_ since \_\_\_\_\_.
- My DWELL time is \_\_\_\_ Months and \_\_\_\_ Days.

**SECTION V - CERTIFICATION/APPROVAL/DISAPPROVAL**

11. I certify that the duty status change (Section II) or that the request for personnel action (Section III) contained herein -

HAS BEEN VERIFIED     RECOMMEND APPROVAL     RECOMMEND DISAPPROVAL     IS APPROVED     IS DISAPPROVED

12. COMMANDER/AUTHORIZED REPRESENTATIVE YOUR COMPANY CO SIGNATURE HERE	13. SIGNATURE	14. DATE (YYYYMMDD)
---	---------------	---------------------

**PERSONNEL ACTION FORM ADDENDUM**

For use of this form see AR 600-8-6 and DA PAM 600-8-21; the proponent agency is ODCSPER

1. NAME OF INDIVIDUAL YOUR NAME HERE	2. SSN  123-45-6789
---	---------------------------

**3. RECOMMENDATIONS FOR APPROVAL/DISAPPROVAL**

a.	(1) ORGANIZATION BATTALION UNIT INFORMATION HERE	(2) OFFICE SYMBOL BATTALION SYMBOL	(3) DATE
----	---	---------------------------------------	----------

(4) ACTION

APPROVED   
  DISAPPROVED   
  RECOMMEND APPROVAL   
  RECOMMEND DISAPPROVAL   
  RETURNED

(5) COMMENTS

(6) NAME BATTALION COMMANDER'S NAME	(7) TITLE/POSITION/RANK BATTALION COMMANDER'S TITLE/RANK
--	---

(8) SIGNATURE BATTALION CDR SIGNATURE	(9) HEADQUARTERS POC TELEPHONE NUMBER (123)456-7890
--	--

(10) FORWARDED TO BRIGADE COMMANDER ADDRESS HERE	(11) ENCLOSURES  <input type="checkbox"/> ADDED <input type="checkbox"/> WITHDRAWN <input type="checkbox"/> NO CHANGE
---	---

b.	(1) ORGANIZATION BRIGADE UNIT INFORMATION HERE	(2) OFFICE SYMBOL BRIGADE SYMBOL	(3) DATE
----	---	-------------------------------------	----------

(4) ACTION

APPROVED   
  DISAPPROVED   
  RECOMMEND APPROVAL   
  RECOMMEND DISAPPROVAL   
  RETURNED

(5) COMMENTS

(6) NAME BRIGADE COMMANDER'S NAME	(7) TITLE/POSITION/RANK BRIGADE COMMANDER'S TITLE/RANK
--------------------------------------	---

(8) SIGNATURE BRIGADE CDR SIGNATURE	(9) HEADQUARTERS POC TELEPHONE NUMBER (123)456-7890
--	--

(10) FORWARDED TO CG, HRC ALEXANDRIA ATTN: Old Guard Liaison 2461 Eisenhower Ave Alexandria, VA 22331-0450	(11) ENCLOSURES  <input type="checkbox"/> ADDED <input type="checkbox"/> WITHDRAWN <input type="checkbox"/> NO CHANGE
---	---

c.	(1) ORGANIZATION	(2) OFFICE SYMBOL	(3) DATE
----	------------------	-------------------	----------

(4) ACTION

APPROVED   
  DISAPPROVED   
  RECOMMEND APPROVAL   
  RECOMMEND DISAPPROVAL   
  RETURNED

(5) COMMENTS

(6) NAME	(7) TITLE/POSITION/RANK
----------	-------------------------

(8) SIGNATURE	(9) HEADQUARTERS POC TELEPHONE NUMBER
---------------	---------------------------------------

(10) FORWARDED TO	(11) ENCLOSURES  <input type="checkbox"/> ADDED <input type="checkbox"/> WITHDRAWN <input type="checkbox"/> NO CHANGE
-------------------	---

4. **DISTRIBUTION** *(List all organizations to receive copy)*

# The Old Guard

## **SOLDIER INFORMATION FORM**

**(Do Not Submit with Application. This is for your information)**

The following information is provided to assist you with your move to the National Capital Region. **Soldiers are authorized to PCS to Fort Myer with their Family Members.** We strongly advise Soldiers who are traveling with family members to arrive Monday through Friday between the hours of 0700- 1600 to better facilitate lodging. If you think you may arrive after duty hours, please contact Personnel to arrange housing with your assigned unit. **Soldiers are authorized to Ship House Hold Goods at the Governments expense.** Transportation of household goods can be coordinated with transportation office at 703-614-7190 or 703-806-4900. During your PCS move if there are any issues please contact The Old Guard Staff Duty at 703-696-3003 for assistance. Additional information can be found at our web site at [www.army.mil/OLDGUARD](http://www.army.mil/OLDGUARD)

### **Old Guard Phone Numbers:**

Recruiter:	703-696-3149
Personnel:	703-696-4677
Staff Duty:	703-696-3003
Chaplain:	703-696-8130
Finance:	703-696-3522
Sponsorship:	703-696-3149/3050

### **Address:**

201 Jackson Ave  
Fort Myer, Virginia  
22211

### **Fort Belvoir ( This is where Soldiers with Family Members are Housed):**

Housing:	703-454-9700
ID Cards/DEERS:	703-805-5578
Army Community Service:	703-805-3413

### **Bonus Information:**

**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, 4/3, DA Form 1966/1-6, DA Form 3286/1-7, AIT Certificate, and Orders Awarding your MOS.**