This document certifies that the East Georgia State College student mentioned below has had an interview with one of the Georgia Southern ROTC Cadre listed below. GSU’s Military Science (ROTC) department is located in Building 804 on the GSU campus, between the IT Building and the Carroll Building. The recommendation has been made for the student to register for MSCI course(s) ___________________________ for ______________________ semester.

The rigorous requirements of physical training, class, lab, and field training exercises have been explained to the student, and the student understands, and agrees to, the commitment.

Student Name: __________________________________________________________

Student Signature: __________________________________________________________________ Date: __________

Signature of ROTC Cadre: __________________________________________________________________ Date: __________

Printed Name and Rank of ROTC Cadre: __________________________________________

Once approved and signed by ROTC cadre, the student will submit this form, in person, to EGSC-S, located at 10449 U.S. Highway 301 South, Statesboro, GA.

The student understands that while he/she is an EGSC-S student, a new form must be completed and submitted to EGSC-S in order to register for the GSU ROTC courses.

By signing above, and initialing here, the student gives East Georgia State College permission to provide to the GSU ROTC department, at the written request of a member of the GSU ROTC cadre, an unofficial academic transcript for verification of course grades and academic standing for the semester indicated on this form, to include prior semesters.

By signing above, and initialing here, the student does not give East Georgia State College permission to provide to the GSU ROTC department an unofficial transcript. The student understands that he/she must submit a Transcript Request form in order to have an official transcript sent to GSU ROTC.

A copy of this completed document will be provided to GSU ROTC for their records.

Student EGSC ID Number: ______________________ Student Telephone #: ______________________

Student Registered for the following CRN(s): ________________________________

Signature of EGSC Representative: __________________________________________________________________ Date: __________

Printed Name and Title of EGSC Representative: __________________________________________________________________

Date sent to GSU ROTC: __________