



## ADVANCED ANTITANK MISSILEMAN COURSE SCREENING CHECKLIST

NAME: \_\_\_\_\_ RANK: \_\_\_\_\_

EDIPI: \_\_\_\_\_ COMPANY/UNIT: \_\_\_\_\_

1. MARINE MUST BE AN ACTIVE OR RESERVE MEMBER OF THE MARINE CORPS. \_\_\_\_\_ INT

2. MARINE MUST BE A 0352 CORPORAL OR SERGEANT. LANCE CORPORALS MAY ATTEND THE COURSE, BUT MUST ARRIVE WITH A LETTER ENDORSED BY THEIR COMMANDING OFFICER STATING THAT THEY ARE SERVING IN A NONCOMMISSIONED OFFICER BILLET. AN 0369 STAFF SERGEANT OR GUNNERY SERGEANT AND 0302 LIEUTENANT MAY ATTEND THE COURSE ON A SPACE AVAILABLE BASIS AT THE DISCRETION OF THE COMMANDING OFFICER, INFANTRY UNIT LEADERS TRAINING COMPANY. \_\_\_\_\_ INT

3. HAS ONE YEAR OF OBLIGATED SERVICE REMAINING AFTER COMPLETION OF COURSE (NAVMC 2771). \_\_\_\_\_ INT

4. MEETS FITNESS STANDARDS (MCO 6100.13) AND IS PHYSICALLY CAPABLE OF PARTICIPATING IN A FITNESS SUSTAINMENT PROGRAM, PFT MUST BE RUN WITHIN 30 DAYS OF COURSE CONVEY DATE.

P/U: \_\_\_\_\_ CRUNCHES: \_\_\_\_\_ RUN: \_\_\_\_\_ SCORE/DATE: \_\_\_\_\_ / \_\_\_\_\_  
\_\_\_\_\_ INT

5. FULL DUTY STATUS, MEDICALLY QUALIFIED.

DENTAL OFFICER: \_\_\_\_\_ INT MEDICAL OFFICER: \_\_\_\_\_ INT

6. MEETS HEIGHT AND WEIGHT STANDARDS (MCO 6100.3), MUST WEIGH IN WITHIN 30 DAYS OF COURSE CONVEY DATE.

HT: \_\_\_\_\_ WT: \_\_\_\_\_ MAX: \_\_\_\_\_ AGE \_\_\_\_\_ DATE: \_\_\_\_\_  
\_\_\_\_\_ INT

\*COMPLETE BELOW INFORMATION IAW (MCO 6100.3) IF SNM EXCEEDS HT/WT STANDARDS.

NECK: \_\_\_\_\_ WAIST: \_\_\_\_\_ BODY FAT %: \_\_\_\_\_ DATE: \_\_\_\_\_

7. NO PRE-EXISTING FAMILY PROBLEMS, FINANCIAL HARDSHIPS, ADMINISTRATIVE, OR LEGAL MATTERS PENDING. \_\_\_\_\_ INT

8. TD REPORT OR PRO/CON MARKS COMPLETED. \_\_\_\_\_ INT

9. POSSESSES APPROPRIATE UNIFORMS AND CIF GEAR FOR THE COURSE. \_\_\_\_\_ INT

THIS MARINE DOES/DOES NOT MEET THE REQUIREMENTS LISTED IN THIS CHECKLIST. IF THE MARINE DOES NOT MEET THE REQUIREMENTS, PLEASE EXPLAIN BELOW:

\_\_\_\_\_  
\_\_\_\_\_

**ADVANCED ANTITANK MISSILEMAN COURSE  
SCREENING CHECKLIST**

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\_\_\_\_\_  
COMPANY 1STSGT  
(PRINT NAME / DATE)

\_\_\_\_\_  
COMPANY 1STSGT  
(SIGNATURE)

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_  
COMMANDING OFFICER  
(PRINT NAME / DATE)

\_\_\_\_\_  
COMMANDING OFFICER  
(SIGNATURE)

\_\_\_\_\_  
PHONE NUMBER