

DEPARTMENT OF
HOMELAND SECURITY
U.S. COAST GUARD
INSTITUTE (3/03)
CGI 1560/08b

UPDATE Educational Assessment Worksheet

This form is to be used to **update** a member's educational assessment. Documents may be submitted anytime the member wishes to update his/her educational record. An official update will not be done until there is a valid to do so. Generally one of the following conditions must apply for a formal update to be performed:

- Member has completed at least 15 additional semester hours of college credit (collegiate or military).
- Member is within 15 semester hours of completing degree requirements.
- Member is ready to enroll with the college.

Instructions for Completion:

1. Responses to the questions on this form must be clear and accurate. Omitting information, using abbreviations or acronyms, or failing to include support documentation may delay or preclude the Institute from processing the application.
2. Transcripts from colleges attended by the applicant and college test score reports should be attached
3. Type the information, if possible. If handwritten, please write clearly and legibly.
4. **INCOMPLETE FORMS WILL NOT BE PROCESSED.**

Applicant completes this section:

Full Name: _____ **SSN:** _____
First Name Middle Last Name

Phone Number: _____ **Rate/Rank:** _____
(Work) (e.g. SN, YN3, LTJG)

Phone Number: _____ **Fax Number:** _____

USCG Affiliation: Active Duty ___ Reserve ___ Civilian Employee ___ Spouse ___

Mailing Address (where results are to be mailed):

Full Name: _____
First Name Middle Last Name

SSN: _____

I. Military Training and Experience Information:

Attach copies of documents certifying completion of additional schools/courses, or advancements in rate/rank **since the initial submission.**

Member's Promotion History:

Promoted to: _____ Effective: _____

Promoted to: _____ Effective: _____

II. Military School Information:

(List only those USCG courses 5 or more days in length. List all courses attended from other DOD, government, or private agencies unless continuing education units were awarded (CEUs). If CEUs were awarded the credits will not be transferable to collegiate level work. **Do not use abbreviations or acronyms. Insert the full title of the course as noted on the certificate of completion.**)

Full Course Title (Basic Military Training, A School, C school, etc.)	Location (TraCen Cape May)	Course No		Date Started	Date Completed

III. College Courses

Attach copies of grade reports (or transcripts) reflecting college courses completed.

IV. College-Level Examinations

Attach copies of score reports documenting tests completed.

V. Degrees earned since original submission:

_____ **at** _____
(e.g. Associates in Arts in History) (e.g. Hometown State College, Youngstown, GA)

VI. Member's Verification

In accordance with the Privacy Act, 5 USC Section 552, Family Education and Privacy Act of 1973, the applicant grants permission for the USCG Institute to discuss personal education information with partnership institutions. Personal information shall not be given to other institutions or to a third party without the applicant's written permission. ALDIST 102/94 authorizes the Institute to collect this information. The Institute will maintain the information in order to officially transcript applicant's military learning experiences. Failure to provide the requested information may adversely affect the college credit recommendations received by the applicant. Member's signature also indicates that the foregoing information is true and accurate.. Member's signature indicates the foregoing information is true and accurate.

Member's Signature

Date xx-xxx-xx

VII. Unit Administrative Data: (To be completed by the Education Services Officer.)

The member above is scheduled for release from active duty: _____
MM/DD/YY

Preferred Areas of Study

ESOs are requested to counsel members in completing this section. If the member has prior college experience and knows the type of degree desired, so indicate. However, if the member is not certain of the type or major, or simply wants the fastest approach, advise them that usually a Liberal Studies degree will maximize the application of their military learning experiences.

(Intended major)

AA/AS BA/BS
(Indicate level)

Authentication: This application will **not be processed** without the signature of the Educational Services Officer, Personnel Officer, or Administrative Chief Petty Officer. The signature authority verifies that the information presented on this questionnaire is true and accurate and matches the information found in the Personnel Data Record of the individual. If a discrepancy appears in the information transferred from entries in the individual's personnel data record, the member must present the PERSRU with supporting documentation that identifies the error, such as course completion certificates from courses that were not entered in his/her record. Corrections must be made prior to submitting this form to the Institute.

Name of Verifying Official

Rate/Rank

Signature

xx-xxx-xx

Title of Verifying Official

Phone Number

E-MAIL address of command ESO: _____
(In the future, the assessment and degree plan may be electronically returned to the ESO.)

Official Mailing Address of Command:

MAIL COMPLETED FORM TO:	COMMANDING OFFICER USCG INSTITUTE (VE) 5900 SW 64 TH ST RM 235 MPB OKLAHOMA CITY, OK 73169-6990
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