

UNITED STATES ARMY PARACHUTE TEAM Golden Knights

Green Platoon Application



PRIVACY ACT OF 1974 COMPLIANCE INFORMATION

The collection of data for this form is and the GKAS Cadre with information Freedom of Information Act (AR 340- will be suitably safeguarded and is no	pertinent to the selection of 17) and The Army Privacy Pro	f qualified ap ogram (AR 34	plicants. Data on this	worksheet is	releasable only i	n accordance with the	
(Signature a	uthorizing collection and rete	ention of Pers	ional Data)			(Date)	
		PERSONAL	INFORMATION				
1a.NAME	b.		С.		2.RANK	3.DOB	
(Last) 4.DoD IDN	(First) 5MIL EMAIL		(Middle)	6.CIVI	LIAN EMAIL		
7.CURRENT ADDRESS			8.HOME PHONE				
			9.CELL PHONE				
10.MARITAL STATUS		11 NO OF	DEPENDENTS	12 51	IGLE PARENT		
SINGL		11. NO. 01	DEFENDENTS	(If "YE	S" see 12b)	YES NO	
12b.CHILDREN (Single Parents) (If selected, you must provide a copy of	12a.SPOUSES NAME	POUSES NAME a.CHILDS NAME		b.DOB b.DOB		C.EFMP YES NO	
your Family Care Plan to the GKAS Cadre	12b1a.CHILDS NAME					c.EFMP YES NO	
upon arrival. If you have more than four children or have any special needs for			c.EFMP YES NO				
your family, annotate it in the space provided on Page 3 Item 1)	12b3a.CHILDS NAME			b.DOB		C.EFMP YES NO	
13a.EMERGENCY CONTACT			b.RELATIONSHIP				
c.PHONE			d.ADDRESS				
e.EMAIL							
	Ш.	MILITARY	INFORMATION				
14.PMOS 15.UN	NIT				16.UIC		
		40.00					
17.UNIT PHONE (COMM)		18.000	T ADDRESS				
19.UNIT PHONE (DSN)							
20. 1SG a. NAME / RANK		b.PHON	IE	c.	EMAIL		
21.CSM a. NAME / RANK				c.	EMAIL		
22 ON 22			ç	25.MILITA	N DV	26.CIVILIAN	
	TIME ON STATION Months)	24.DERO		EDUCATIO		EDUCATION LVL	
27.PERMANENT PROFILE YES (If "YES" attach a copy)	NO 28.ACFT SCORE	29./	ACFT DATE		(Attached DA For submission date	orm 705 must be within 30 days of e.)	
30.HEIGHT 31.WEIGHT (In Inches) (In Pounds)	^{32.}	NO-G	0 (Attached DA For	rm 5500/550:	1 must be within 3	30 days of packet submission)	
All applicants will submit a co	-	-			-		
SERVICE MEMBERS ARE NOT A	UTHORIZED TO ATTEND	GOLDEN KN	NIGHTS ASSESMEN	T AND SELE	CTION WHILE O	ON TEMPORARY PROFILE.	

LAST NAME	III. MILITA	ARY ASSIG		AND REFER	ENCES	DoD IDN	
1a.UNIT	b.FROM/TO		c.SUPERVISOR		dMIL EMAIL		
2a.UNIT	b.FROM/TO	M/TO		c.SUPERVISOR			
3a.UNIT	b.FROM/TO	c.SUPERVISOR			dMIL EMAIL		
4a.MIL REFERENCE		b.PHONE		c.EN	1AIL		
5a.MIL REFERENCE		b.PHONE	c.EMAIL		1AIL	L	
6a.MIL REFERENCE		b.PHONE		c.EN	IL		
		V. I	MORAL / FINANC	CIAL			
22.ANSWER THE FOLLOWING QUES	TIONS. EVERY ITEM MARI	KED "YES" M	IUST BE FULLY EXPLA	INED IN ITEM #1	Page 3.		
(a) DO YOU HAVE A GOVER	NMENT CREDIT CARD (Ente	er <u>expiratior</u>	n date only , in Item #.	1 Page 3)	YES	NO	
(b)HAVE YOU EVER DEFAUL	TED ON A LOAN				YES		
(c)HAVE YOU EVER HAD PRO	OPERTY REPOSESSED				YES		
(d)HAVE YOU HAD ANY TRA	FFIC VIOLATIONS				YES	 NO	
(e)HAVE YOU EVER BEEN CH	ARGED OR CITED FOR DU	I/DWI			YES	NO	
(f)HAVE YOU EVER TESTED F	POSITIVE ON A URINALYSIS	FOR DRUG	s		YES	NO	
(g)HAVE YOU EVER BEEN PL	INISHED UNDER UCMJ				YES		
(h)HAVE YOU EVER RECEIVE	D A SUSPENSION OF FAVO	RABLE ACTI	ONS (FLAG)		YES	NO	
(i)HAVE YOU EVER RECEIVED	O A BAR TO REENLISTMEN	т			YES	NO	
(j)HAVE YOU EVER EVER BEE	EN ARRESTED				YES	NO	
(k)HAVE YOU EVER BEEN DE	NIED OR LOST A SECURITY	CLEARANC	E		YES	NO	
	V.	MORAL /	FINANCIAL (con	t.) / REMARK	S		
1.EXPLAIN ALL "YES" ANSWERS TO with the referenced ltem #)	QUESTIONS 22(a) - (k) ABC)VE. (Descrik	be answer(s), give dat	e(s),specific detc	ills, and final disposition. I	Begin each line	
2a.DO YOU HAVE A CIVILIAN	YES NO b.DL#		c.STATE	d.EXPIRATION	e.EN	IDORSEMENTS	
	I						

		MARKS	
3.ANSWER THE FOLLOWIN	IG QUESTIONS:		
a.WHY DO YOU WANT	TO BE A GOLDEN KNIGHT?		
b.WHY SHOULD YOU B	E CONSIDERED?		
C IS THERE ANYTHING	ELSE ABOUT YOU THAT WE SHOULD KNOW BUT HAVEN	יד אכגינטא	
		GNATURE	
	"I certify the information contained in this applica	tion is true and correct to the best of my knowledge."	
	Typed Name	Signature	
		Senara	
Applicants are responsible	e for keeping the USAPT informed of current mili	tary and civilian addresses and telephone numbers. Repo	rt all changes to the
Administration Section at (email address is essential fo	COMM) 910-907-3205. USAPT will notify applicants by or notification.	email if they have been accepted or not to be assigned to Gr	een Platoon. A correct

VIII.COMMAND	ERS ENDO	RSEMENTS		
THRU TO Commander US Army Parachute Te Bldg 3-3327 Butner Ft. Liberty NC 28310	am		FROM	
SECTION I - PERS	ONAL IDEN	NTIFICATION		
1.NAME OF INDIVIDUAL 2.RAN	IK/PMOS	/	3.DoD IDN	
SECTION II- SU	JBJECT OF	REQUEST		
I request approval for attendance to the United States Army Parac	chute Team "	Golden Knights" Asse	ssment and Se	lection Program (GKAS).
4.SIGNATURE OF SOLDIER		5.DATE		
SECTION III- COMMAN	IDERS ACK	NOWLEDGMENT	S	
(1) I am aware that , a member of "Golden Knights."	of my comma	and, is applying for a p	position with th	ne U.S. Army Parachute Team
(2) I understand that if is accepted at Fort Liberty, North Carolina.	d to the prog	ram, he/she will be pu	ut on assignme	nt to the U.S. Army Parachute Team
(3) I have ensured that has been assigned to a deployable unit, this form must be endorsed by the Brigade Cor			it fencing stabi	ilization codes. NOTE: If Soldier is
(4) I further understand that should Team will generate a request to HRC for immediate reassignment of the Sold indefinitely pending HRC assignment instructions. All Soldiers must participa to certify each Soldier for the upcoming demonstration season.	ier. Soldiers s	selected as Golden Kn	ights will be as	
SECTION IV- APP	ROVAL/DI	SAPPROVAL		
6. I certify that the request for attendance <i>(Section II)</i> contained herein -			D DISAPPROVA	AL
7.COMPANY COMMANDER (Last, First, Middle)(RANK) 8.SIGNATURE				9.DATE
a. TO 9. BN AUTHORITY	b. F	FROM		
	MMEND:			RECOMMEND DISAPPROVAL
d.NAME (Last, First, Middle)	_	ANK	t.u.	ATE
g.TITLE/POSITION	h.SIGNATU	IRE		
i.COMMENTS	1			
10. BDE AUTHORITY (If Applicable)	b. F	FROM		
c.ACTION: APPROVED		DISAPPROVI		
d.NAME (<i>Last, First, Middle</i>)		ANK	f.D.	ATE
g.TITLE/POSITION	h.SIGNATU	IRE		
i.COMMENTS	•			

IX. AIRBORNE ASSIGNMENT ACCEPTANCE/DECLINATION STATEMENT

Per AR 614-200, Soldiers on assignment instruct Airborne position unless physically disqualified, or another Airborne, Airborne Ranger, Special Ford are still eligible for assignment to the US Soldier must adhere to acceptance of an Airb reporting to the USAPT are subject to UCMJ action	exempted by general court m ces or other training/assignm APT; however, they must porne assignment. Soldiers w	nartial authority, separated, reassign nent considered by DA to have high reenlist or extend to meet th	ed by the Department of the Army or accepted er priority. Soldiers with less than 4 years to E e service obligation of the assignment. T
I accept / decline AIRB	ORNE ASSIGNMENT FOR:	Duty statio	(W027T1) FT Liberty, NC 28310
OLDIER (LAST, FIRST, MI)	SIGNATURE		DATE
WITNESS (LAST, FIRST, MI)	SIGNATURE		DATE

ENSURE THE FOLLOWING ITEMS HAVE BEEN ADDED TO THE ATTACHMENTS SECTION BELOW (Photocopied / Scanned images must be clear and legible.)(Grayscale @ 200dpi preferred)

(DA Photo must be a Color Digital Image in .jpg format.)

- 1. Current and updated STP
- 2. Last three (3) NCOERs (If applicable)
- 3. DA Photo (Color Copy)(5"x7" Minimum)
- 4. DA Form 705 (PT Card)
- 5. DA Form 5500/5501 (Army Body Composition Worksheet)
- 6. Photo copy of Freefall logbook displaying jumps over the last 12 months (if applicable)
- 7. Photo copy of USPA license and ratings (If applicable)
- 8. Copy of Permanent Profile (If applicable)
- 9. 4187 Conditional Release from branch

ATTACHMENTS

NOTE: Before attaching files to this application ensure that you have renamed them using the following naming convention:

LastNameFirstInitial_GKGPApplicationYear_Title

Examples: SmithT_2023_NCOER1 SmithT_2023_PTCard

ONLY FILES OF THE FOLLOWING TYPES CAN BE ATTACHED: *.pdf, *.jpg, *.docx, *.tiff

INSTRUCTIONS TO APPLICANT

- 1. TOOLTIPS are available for selected fields. Hover the mouse over the field to see if TIP is available.
- 2. Before submitting application, ensure you rename your application file using the following naming convention:

LastNameFirstInitial_GKGPApplicationYear_APPLICATION Example: SmithT_2023_APPLICATION

- 3. Email your completed application to the following email address: usapt-gkas@army.mil
- 4. Subject line will be NAME / RANK / PMOS / GKAS / "Application" Year Example: Thomas Smith / SGT / 19D / GKAS / Application 2023

5. Include in the body of your email your current mailing address and the best number to reach you.