

MEMORANDUM FOR Truman Education Center, ATTN: Education Counselor

SUBJECT: Basic Skills Education Program (BSEP)

1. Request the following named soldier attend the AM BSEP program:

Name, Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_  
 Rank \_\_\_\_\_ Unit \_\_\_\_\_ BASD \_\_\_\_\_ ETS \_\_\_\_\_ GT \_\_\_\_\_

2. Reason for attendance: REENLIST/GT IMP/SCHOOL/PROM/OTHER  
 (Circle Reason)

3. I understand that this is normally an eight-week program and that the Soldier may test out early. I have counseled \_\_\_\_\_ that if enrolled, he/she is responsible for attending BSEP at the Truman Education Center, Building 499, during AM classes from 0730 to 1130. Service Member understands that if he/she misses three days that he/she will be dropped from the course. Only an education counselor can authorize extensions beyond 8 weeks, with agreement from the company level authority indicated below.

4. Weekly progress and attendance reports will be sent via email to the NCOIC.

5. I understand my responsibilities to comply with the above standards.

Soldier's signature: \_\_\_\_\_ Date: \_\_\_\_\_

THE COMPANY COMMANDER, BY THE SIGNATURE BELOW, VERIFIES THAT THE SOLDIER'S ANTICIPATED DUTIES WILL NOT INTERFERE WITH HIS/HER ATTENDANCE IN BSEP. THE COMMANDER UNDERSTANDS THAT EXCESSIVE ABSENCES WILL RESULT IN THE SOLDIER BEING DROPPED FROM THE CLASS.

6. Company CDR/ISG Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Company CDR/ISG Printed Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**STUDENT INFORMATION**

STUDENT					
SSN:	Cell or Alternate Phone:	Orderly Phone:	E-Mail:		
NCOIC					
Last Name:	First Name:	Rank:	Duty Phone:	Cell Phone:	E-Mail:
ISG					
Last Name:	First Name:	Rank:	E-Mail:		
Reason Enrolled:	ANCOC / BNCOC	GT/AFCT	Other:		
Date of Last GT Testing:	BPED:		Entry GT Score:		
Start Date:	Completion Date:		Exit GT Score:		
Total Hours in Class:	Instructor:		<input type="checkbox"/> AM <input type="checkbox"/> PM		