



DEPARTMENT OF THE NAVY
JOINT BASE PEARL HARBOR-HICKAM
850 TICONDEROGA ST STE 100
PEARL HARBOR HI 96860-5102

JBPHHINST 5530.4

JUL 08 2014

JOINT BASE PEARL HARBOR-HICKAM INSTRUCTION 5530.4

From: Commander, Joint Base Pearl Harbor-Hickam

Subj: AUXILIARY SECURITY FORCE

Ref: (a) SECNAVINST 5530.4D
(b) OPNAVINST 5530.14E
(c) CNICINST 5530.14A

Encl: (1) Appointment as ASF Coordinator Letter
(2) OC Screening Form
(3) ASF Statement of Understanding
(4) ASF Gear Issue
(5) ASF Member(s) Drop Letter
(6) ASF Appointment Letter
(7) ASF Monthly Training Memorandum
(8) Fair Share Tasking Methodology
(9) Lautenberg Act DD 2760
(10)NETCINST 1500.13A High Risk Student Medical Screening Form

1. Purpose. To define the mission, responsibilities, training and management of the Auxiliary Security Force (ASF) for Joint Base Pearl Harbor-Hickam (JBPHH) Host/Tenant Commands.

2. Background. References (a) through (c) establish the requirements for an ASF composed of non-deployable personnel from the host and tenant organizations capable of performing security functions. Additionally, references (a) through (c) establish the training and operational guidelines for the force. The Commanding Officer, Joint Base Pearl Harbor-Hickam, is responsible for the organization and training oversight of the ASF program. Manning levels for providing commands/departments are established at the percentage of each organization's E6 and below population in accordance with procedures set forth in reference (c) and enclosure (8). Enclosures (2) through (10) provide standard forms and supplemental information to implement the ASF program at Joint Base Pearl Harbor Hickam.

3. Mission. The ASF will augment the permanent Installation Security Force and Pacific Missile Range Facility Barking Sands, Kauai in order to ensure full manning of posts and patrols required in increased Force Protection Conditions (FPCON). The ASF may also be deployed in the event of civil disturbance, natural disaster, or any other incident or special function requiring augmentation of the permanent security force. When directed, personnel assigned to the ASF are subject to recall within two hours of notification. ASF personnel will be assigned posts by the Installation Security Officer.

JUL 08 2014

4. Responsibilities

a. Commanding Officer JBPHH shall:

(1) Review ASF manning on a quarterly basis.

(2) Outline situations in which ASF activation is expected, including but not limited to, elevated Force Protection Conditions, bomb threats or hostage situations, crowd control during civil disturbances, public events, anti-looting and general security in post-disaster situations such as destructive weather, major fires or explosions and as otherwise determined to be necessary during periods of increased security force deployment. Actively engage tenant commands and operational units to coordinate the use of auxiliary security force and qualified operational unit personnel to augment Navy Security were able to do so (e.g., flight line access control, pier access control, entry control, entry control point operations) in order to deliver protective capabilities at minimum cost to CNIC.

(3) Direct the establishment and outline the authorities of ASF operational and administrative chains of command, to include disciplinary action and parent command/activity notification of performance. Commanding Officer, JBPHH will ensure Tenant Commanding Officers/Officers-in-Charge of personnel who fail to report for training and/or duty are officially notified in writing, and inform the tenant command's Immediate Superior in Charge (ISIC).

b. Commanding Officers and tenant commands/departments shall support and participate in the JBPHH ASF program in accordance with references (a) through (c) and this instruction, to include:

(1) Assign and maintain at least the minimum number of designated and trained ASF personnel available for ASF assignment as determined by the JBPHH ISO.

(2) Appoint a primary and alternate ASF coordinator to liaise with the JBPHH ASF Coordinator on ASF matters using enclosure (1).

(3) Provide ASF personnel when requested for proficiency watches, exercises, and as otherwise required to ensure the security of the installation.

c. JBPHH Installation Security Officer (ISO) shall:

(1) Have operational control of the assigned ASF and will be responsible for individual training, watch standing, exercises and outfitting at the activity level.

JUL 08 2014

(2) Report to the JBC in the deployment of all ASF and provide program oversight and accept/reject nominees as recommended by the ASF coordinator.

(3) Review ASF posts at least annually and make recommendations to the JBC as needed to establish or delete posts based on threat, vulnerability and criticality.

(4) Ensure all posts are designated in the installation Antiterrorism (AT) plan with the number of personnel required to man those posts during increased FPCONs. Additionally JBPHH will provide the additional ASF personnel required to meet PMRF Barking Sands posts

(5) Coordinate training of the ASF.

(6) Determine ASF manning requirements for each tenant command and JBPHH department in accordance with the procedures set forth in reference (c) and enclosure (2).

(7) Provide a monthly report of any personnel not reporting for duty as required or any tenant or department head refusing to provide support as required.

d. The JBPHH ASF coordinator (normally an E7 or above) shall be assigned on a collateral duty basis within the JBPHH Security Department. The JBPHH ASF Coordinator shall:

(1) Liaise with department/tenant ASF coordinators as directed by the JBPHH ISO.

(2) Establish a phone tree for a recall through department and tenant ASF coordinators.

(3) Screen individuals to ensure qualifications.

(4) Recommend to the ISO acceptance/rejection of nominees based strictly on the nominee's ability to meet established standards.

(5) Ensure ASF personnel successfully complete Navy Security Force Sentry (NSFS) #A-830-2216 and Reaction Force Basic #A-830-2217 Courses or Armed Sentry/Security Reaction Force - Basic Course #A-830-0018.

(6) Issuing of all necessary gear and clothing for ASF duties.

JUL 08 2014

(7) Ensure all gear is returned prior to ASF members' departure.

(8) Establish a monthly watch bill using all ASF members.

(9) Ensure each member participates annually in a major exercise.

(10) Return personnel to their respective commands that do not meet initial assignment qualifications and require the tenant/department to supply an immediate qualified relief.

(11) Delegate supervisory authority commensurate with rank and expertise within the ASF organization.

(12) Monitor performance of posted ASF personnel to ensure adequacy of proficiency training.

(13) Inform the ISO of the status of the ASF to include tenant and departmental support, numbers required/assigned, training and exercises planned at least monthly or more frequently if ASF requirements are not being met.

(14) Monitor through contact with tenant command and departmental representatives, as well as through leave/TAD requests to ascertain the number of available ASF personnel at a minimum of once a month.

(15) Maintain an inventory control system to monitor necessary gear/equipment issuance and accountability.

5. Assignment to ASF Duties

a. Commands shall appoint a Command ASF Coordinator and alternate, using the format provided in enclosure (1). Upon turnover of the Tenant Command ASF Coordinator/Alternate duties, enclosure (1) will be forwarded to the Installation ASF Coordinator within 10 working days.

b. All personnel selected for ASF duties shall attend the ASF academy. Personnel must arrive at the academy with all prescreening paperwork completed (enclosures 2, 3, 4, and 5 apply).

c. Initial ASF Academy class quotas are controlled by the JBPHH ASF Coordinator. Commands will be assigned quotas based on required/current manning levels, prospective losses, and/or removal of a member from the ASF.

JUL 08 2014

d. ASF members will be issued gear on the first day of the academy utilizing enclosure (4). All ASF gear/equipment shall be returned to the Security Supply Division upon termination of ASF duties. Personnel failing to return issued gear will be required to reimburse the government. Commands shall ensure check out procedures verify gear has been turned in.

e. Personnel who fail to complete initial ASF training will be dropped utilizing enclosure (5) with the appropriate reason listed.

f. Personnel successfully completing the ASF Academy will be appointed via enclosure (6). Due to the extensive training required the minimum assignment to the ASF is 18 months. Tenant Command ASF Coordinators shall complete and forward enclosure (5) to the JBPHH ASF Coordinator 60 days prior to the intended date of replacement or transferring of assigned ASF members.

6. Training and Qualifications

a. The Installation ASF coordinator will distribute the monthly training letter and monthly watch bill schedules on the 15th of each month prior to the upcoming month to the Tenant Command Coordinators and all active ASF members. Letters and schedules will be provided on the preceding Friday during months when the 15th falls on a weekend. Tenant Command ASF Coordinators are responsible for ensuring their personnel are notified well in advance of training requirements.

b. All ASF personnel must attend the monthly sustainment training. Tenant Command Coordinators will notify the JBPHH ASF Coordinator of emergency situations. If a member cannot attend training on their assigned date(s), the coordinator must notify the JBPHH ASF Coordinator at least three (3) days prior to the day of training. Notification by the member is not sufficient.

c. JBPHH ASF Coordinators are authorized to conduct training on a quarterly basis as long as a minimum of three training topics are covered for the quarter meeting the same requirements as if the training were given monthly. This is to ease the multiple times an individual would have to be removed from their commands and reduce the impact on tenant commands scheduled events.

7. Administrative Procedures. The following procedures shall be used by ASF Coordinators in the administration of the ASF program.

a. JBPHH ASF Coordinator shall:

JUL 08 2014

- (1) Coordinate with security training department for training, weapons qualifications and quarterly ASF drill evolutions for all JBPHH installations.
 - (2) Manage the administrative upkeep of all training records, recall rosters and watch bills.
 - (3) Recall the ASF, when directed by higher authority or in response to event of increased FPCONS. The ISO will assume operational control of all recalled personnel.
 - (4) Notify Tenant Commands in the event that ASF personnel do not maintain required qualifications and initiate a drop letter for those personnel. Individual commands are responsible for providing a replacement for dropped personnel within 10 working days after notification.
- b. All Command ASF Coordinators are responsible for maintaining an accurate recall roster for ASF personnel assigned to their command as well as their own recall information on file with the JBPHH ASF Coordinator. Enclosure (11) will be forwarded to the ASF Coordinator no later than the 15th of each month.
- c. Duty points of contact (i.e., quarterdeck, CDO, OOD) for each command will be maintained current and on file with the Installation ASF Coordinator. These points of contact must have immediate access to Enclosure (11) in the event of an after-hours recall.
- d. Tenant Commands are strongly encouraged to add the tenant Command ASF Coordinator to their respective command check out procedure sheet. During checkout of ASF personnel from their respective commands, Tenant Command Coordinators are to direct members to report to the Installation ASF Coordinator. The member will be given their training record upon receipt of all assigned gear. The JBPHH ASF Coordinator will acknowledge receipt of gear issued on enclosure (4).


J. W. JAMES

Distribution:
Electronic only via CNIC Portal Web site
[https://g2.cnic.navy.mil/tscnrh/JOINTBASEPEARLHARBOR-HICKAMHI/
JBPHH%20Instructions/Forms/Instructions.aspx](https://g2.cnic.navy.mil/tscnrh/JOINTBASEPEARLHARBOR-HICKAMHI/JBPHH%20Instructions/Forms/Instructions.aspx)

JBPHHINST 5530.4

JUN 08 2014

5530
Ser
Date

From: Commanding Officer, _____
To: _____

Subj: APPOINTMENT AS COMMAND AUXILIARY SECURITY FORCE (ASF) COORDINATOR

Ref: (a) JBPHHINST 5530.4

1. Per reference (a), you are hereby designated as this command's (Primary/Alternate) ASF Coordinator. You are to become familiar with and carry out all duties outlined in reference (a).

/S/

Copy to:
JOINT BASE PEARL HARBOR-HICKAM (JB00)
INSTALLATION ASF COORDINATOR

Encl (1)

JUL 08 2014

OC MEDICAL SCREENING FORM
(Privacy Act Statement attached)

CLASS NUMBER: _____

DATE: _____

NAME: _____ RATE: _____ AGE: _____
(LAST) (FIRST) (MI)

SERVICE MEMBER COMMAND: _____

COMMAND LOCATION: _____ PHONE: _____

<u>ANSWER ALL QUESTIONS YES OR NO</u>	YES (Initial)	NO (Initial)
1) HAVE YOU EVER HAD ASTHMA OR ARE YOU ASTHMATIC NOW?		
2) DO YOU HAVE A HISTORY OF, OR, ARE YOU CURRENTLY BEING MONITORED FOR HEART DISEASE / PROBLEMS, HIGH BLOOD PRESSURE OR DIABETES?		
3) DO YOU HAVE ANY FRACTURES, SPRAINS, STRAINS, SPLINTS OR CASTS? DO YOU HAVE A RECENT HISTORY OF LEG, KNEE, ANKLE, OR BACK TROUBLE?		
4) ARE YOU CURRENTLY TAKING ANY MEDICATION(S) (PRESCRIBED OR OVER-THE-COUNTER) WHICH HAVE SIDE EFFECTS OF DROWSINESS, DIZZINESS, VISUAL DISTURBANCES OR DECREASED MUSCLE COORDINATION?		
5) DO YOU WEAR CONTACT LENSES? NOTE: Contact Lenses MUST be removed prior to OC Contamination. It is recommended that you have available and utilize prescription eyeglasses following the OC Decontamination and Recovery phase of the OC Final Practical Drill.		
6) FEMALES: ARE YOU PREGNANT OR DO YOU SUSPECT THAT YOU ARE PREGNANT?		
7) ARE YOU ON LIGHT DUTY OR LIMITED DUTY?		
8) ARE YOU WITHIN THE MINIMUM / MAXIMUM WEIGHT STANDARDS FOR YOUR HEIGHT AS SET FORTH IN OPNAVINST 6110.1 SERIES?		
9) I HAVE SCORED A MINIMUM OF SATISFACTORY ON MY LAST PRT GIVEN ON _____ (DATE: DD/MM/YYYY).		
10) HAVE YOU EVER SUFFERED FROM HEAT STROKE OR HEAT EXHAUSTION?		
11) ARE THERE ANY MEDICAL OR PSYCHOLOGICAL PROBLEMS, WHICH MIGHT HINDER YOU FROM COMPLETING THE COURSE; e.g., CLAUSTROPHOBIA, ALLERGIC REACTIONS TO PEPPERS, ETC.?		

JUL 08 2014

If you have answered yes to any question (s), with the exception of questions 7 & 8, please amplify below. Additionally, you are responsible for notifying an instructor upon a change to any of the above at the first opportunity.

Signature of student: _____ Date: _____

Student remarks:

Medical evaluation:

Reviewed by: _____ Date: _____

JUL 08 2014

ASF STANDARD DUTY GEAR ISSUE SUPPLY LIST

NAME: _____ RATE/RANK: _____
SSN: _____ COMMAND: _____

<u>ITEMS</u>	<u>QTY</u>	<u>ISSUE DATE</u>	<u>INITIALS</u>
AMMO POUCH	1		
BATON (EXPANDABLE)	1		
BATON HOLDER	1		
BELT KEEPERS	2		
BELT NYLON	1		
BODY ARMOR	1		
GLOVES POUCH	1		
GLOVES WHITE	1		
HANDCUFFS AND 1 KEY	1		
HANDCUFFS POUCH	1		
9MM HOLSTER	1		
(OC) MK-4 SPRAY	1		
(OC) MK-4 SPRAY HOLSTER	1		
RADIO HOLSTER	1		
TRAFFIC VEST	1		

I UNDERSTAND THAT THE ITEMS LISTED ABOVE ARE ISSUED TO ME AND ARE TO BE USED FOR THE SOLE PURPOSE THAT THEY WERE INTENDED. ANY LOSS AND OR DAMAGE TO THE LISTED EQUIPMENT ABOVE ARE TO BE REPLACED AT MY EXPENSE (INITIALS). ITEMS NOT RETURNED AT THE END OF TOUR BY THE MEMBER WILL BE REPLACED AT THE ASF MEMBERS EXPENSE (INITIALS)

SIGNATURE OF MEMBER: _____
DATE AND TIME ITEMS RECEIVED: _____

JBPHHINST 5530.4

JUL 08 2014

5530
Ser
Date

From: Commanding Officer, _____
To: Commander Officer, Joint Base Pearl Harbor-Hickam

Subj: ASF MEMBER(S) DROP LETTER

Ref: (a) JBPHHINST 5530.4

Encl: (1) Screening letter(s) for replacement ASF candidate(s)

1. Per reference (a), the following individual(s) from this command will be removed from the ASF:

<u>NAME/RATE</u>	<u>PLATOON/SECTION</u>	<u>DATE</u>	<u>REASON</u>
------------------	------------------------	-------------	---------------

2. Per reference (a), the following individual(s) from this command require quotas for the ASF Academy as replacements for the above listed individual(s). Enclosure (1) is submitted for review:

<u>NAME/RATE</u>	<u>PLATOON/SECTION</u>
------------------	------------------------

/S/

Copy to:
Joint Base Pearl Harbor-Hickam (N00)
Installation ASF Coordinator

Encl (5)

JBPHHINST 5530.4

JUL 08 2014

5530

Ser

Date

From: Commanding Officer, Joint Base Pearl Harbor-Hickam
To: _____

Subj: AUXILIARY SECURITY FORCE (ASF) APPOINTMENT LETTER

Ref: (a) OPNAVINST 5530.14 (Series)
(b) JBPHHINST 5530.4
(c) CNICINST 5530.4

1. Having successfully completed ASF initial training, in accordance with references (a) and (b), you are hereby appointed as a member of the ASF.

2. You are advised this appointment is for a minimum of 18 months from the date of this letter. Upon completion of 16 months you may request, via the chain of command, to be relieved from ASF duties. Relief will be considered based upon manning availability at that time.

3. You are directed to attend all scheduled training. If a conflict with scheduled training exists, you must contact the Command ASF Coordinator at least one (1) week prior to the scheduled training. Questions about scheduled training can be directed to this Command's ASF Coordinator NAME, at Telephone Number.

/S/

Copy to:
Joint Base Pearl Harbor-Hickam (N00)
Installation ASF Coordinator

Encl (6)

JBPHHINST 5530.4

JUL 08 2014

5530
Ser
Date

From: Commanding Officer, Joint Base Pearl Harbor-Hickam
To: Commanding Officer, _____

Subj: ASF MONTHLY TRAINING MEMORANDUM

Ref: (a) JBPHHINST 5530.4

1. The following individual(s) from your command were absent from their scheduled ASF training on _____.

<u>Name/Rate</u>	<u>Platoon/Squad</u>	<u>Date</u>	<u>Reason</u>
------------------	----------------------	-------------	---------------

2. I cannot overemphasize the importance of this training or the need for a properly armed and trained Regional Auxiliary Security Force and I request your assistance in ensuring personnel scheduled for training are present when required. I will continue to personally monitor this situation.

/S/

Copy to:
Joint Base Pearl Harbor-Hickam (N00)
Installation ASF Coordinator

Encl (7)

JUL 08 2014

FAIR SHARE TASKING METHODOLOGY

THE FOLLOWING IS ONLY AN EXAMPLE AND DOES NOT REFLECT ACTUAL CNRH NUMBERS

Using the current Security Post Validation and the approved and exercised installation AT plan, determine the number of personnel required to man all posts under FPCON CHARLIE/DELTA (Example=180). Determine the current/validated NSF staffing for appropriate FPCON (BRAVO for most installations), (Example=144). The difference (36) is the ASF requirement. Determine the number of ASF - eligible personnel assigned to the installation (Example=142). Divide the ASF requirement (36) by the ASF - eligible personnel (142) to determine the fair share ratio (.253). Apply the ratio (multiply) to each department/tenant with ASF - eligible personnel to determine their fair share (round up over .50).

Department Or tenant Command	ASF -- eligible assigned	Ratio	Fair share to provide to ASF
Shipyard	40	0.253	10
CPF	26	0.253	7
USAF Ops	25	0.253	6
FISC PH	12	0.253	3
PSD	20	0.253	5
NSSC	19	0.253	5
Total	142		36

Commands having five or less personnel assigned to the command or other manning limitations where providing fair share for ASF duties would result in absolute mission failure may request a waiver from the Commanding Officer, Joint Base Pearl Harbor-Hickam. The request must be made in writing, cite supportable justification, and be endorsed by the first flag officer in the tenant's chain of command.

QUALIFICATION TO POSSESS FIREARMS OR AMMUNITION

PRIVACY ACT STATEMENT

AUTHORITY: 18 U.S.C. 922(g)(9); E.O. 9397.

PRINCIPAL PURPOSE(S): To obtain information to determine if you have been convicted of a crime of domestic violence which would disqualify you from shipping, transporting, possessing or receiving either Government-issued or private firearms or ammunition and to determine if reassignment, reclassification, detail or other administrative action is warranted. Your Social Security Number is solicited solely for purposes of verifying your identity.

ROUTINE USE(S): To the Department of Justice so that such information can be included in the National Instant Criminal Background Check System which may be used by firearm licensees (importers, manufacturers or dealers) to determine whether individuals are qualified to receive or possess firearms and ammunition.

DISCLOSURE: Mandatory for all personnel who are required to certify. Failure to provide the information may result in (1) (military only) the imposition of criminal or administrative penalties for failing to obey a lawful order, and (2) (civilian only) the imposition of administrative penalties, to include removal from Federal service. However, neither your answers nor information or evidence gained by reason of your answers can be used against you in any criminal prosecution for a violation of Title 18, United States Code, Section 922(g)(9), including (military only) prosecutions under the Uniform Code of Military Justice, based on a violation of Section 922(g)(9), for conduct which occurred prior to the completion of this form. The answers you furnish and any information resulting therefrom, however, may be used against you in a criminal or administrative proceedings if you knowingly and willfully provide false statements or information.

SECTION I - INSTRUCTIONS

An amendment to the Gun Control Act of 1968 (18 U.S.C. 922) makes it a felony for anyone who has been convicted of a misdemeanor crime of domestic violence to ship, transport, possess, or receive firearms or ammunition. It is also a felony for any person to sell or otherwise dispose of a firearm to any person so convicted.

The Department of Defense has, by policy, expanded the prohibitions contained in Title 18 Section 922(g)(9) to those military or civilian personnel who have felony convictions for crimes of domestic violence. Convictions of crimes of domestic violence do not include summary court-martial convictions, the imposition of nonjudicial punishment (Article 15, UCMJ), or deferred prosecutions (or similar alternative dispositions) in civilian courts. Furthermore, a person shall not be considered as having committed a "crime of domestic violence" for purposes of the firearms restriction of the Gun Control Act unless all of the following elements are present:

- (1) the person was convicted of a crime;
- (2) the offense has as its factual basis the use or attempted use of physical force, or threatened use of a deadly weapon;
- (3) the convicted offender was at the time of the offense:
 - (a) a current or former spouse, parent or guardian of the victim,
 - (b) a person with whom the victim shared a child in common,

- (c) a person who was cohabiting with or has cohabited with the victim as a spouse, parent, or guardian, or
- (d) a person who was similarly situated to a spouse, parent, or guardian of the victim;
- (4) the convicted offender was represented by counsel, or knowingly and intelligently waived the right to counsel;
- (5) if entitled to have the case tried by jury, the case was actually tried by jury or the person knowingly and intelligently waived the right to have the case tried by jury;
- (6) the conviction has not been expunged or set aside, or the convicted offender has not been pardoned for the offense or had civil rights restored, unless the pardon, expungement, or restoration of civil rights provides that the person may not ship, transport, possess or receive firearms.

If you have ever received a domestic violence conviction: (1) you may not possess any firearm or ammunition; and (2) you must return any Government-issued firearm or ammunition to your commander or immediate supervisor; and (3) you must take steps to relinquish possession of any privately owned firearms or ammunition. Furthermore, any previously issued authorization to possess a firearm or ammunition is revoked.

If you have any questions, or you are uncertain if you have such a conviction, you may wish to contact a legal assistance attorney, if eligible, or a private attorney, at your own expense.

SECTION II - QUALIFICATION INQUIRY *(Complete and return to your commander or immediate supervisor within 10 days of receipt)*

1. HAVE YOU EVER BEEN CONVICTED OF A CRIME OF DOMESTIC VIOLENCE AS DESCRIBED ABOVE: *(Initial and date)*

YES	NO	I DON'T KNOW <i>(Provide explanation on reverse)</i>
-----	----	--

2. IF YOU ANSWERED "YES" TO THE FIRST QUESTION, PROVIDE THE FOLLOWING INFORMATION WITH RESPECT TO THE CONVICTION:

a. COURT/JURISDICTION	b. DOCKET/CASE NUMBER
c. STATUTE/CHARGE	d. DATE SENTENCED <i>(YYYYMMDD)</i>

3. CERTIFICATION. I hereby certify that, to the best of my information and belief, all of the information provided by me is true, correct, complete, and made in good faith. I understand that false or fraudulent information provided herein may be grounds for criminal and/or administrative proceedings, to include (if civilian) adverse action, up to and including removal, and (if military) disciplinary action under the Uniform Code of Military Justice. I further understand that I have a continuing obligation to inform my Commander or Supervisor should I be convicted of a crime of domestic violence in the future.

a. NAME <i>(Last, First, Middle Initial)</i>	b. RANK/GRADE	c. SOCIAL SECURITY NUMBER
d. ORGANIZATION	e. SIGNATURE	f. DATE SIGNED <i>(YYYYMMDD)</i>

JUL 08 2014

Appendix 9-R

MEDICAL CRITERIA FOR HIGH-RISK TRAINING

PRIVACY ACT STATEMENT

- 1. Authority: 5 U.S.C. 301, Departmental regulations and E. O. 9397.
- 2. Principle Purpose: To assist in determining physical suitability for participation in fire fighting training.
- 3. Routine Uses: The blanket routine uses that appear at the beginning of the Department of the Navy's compilation in the Federal Register apply.
- 4. Mandatory or voluntary disclosure and effect on individual not providing information: Providing the information is voluntary; however, failure to do so may preclude participation in fire fighting training.

Name: _____ Rank/Rate: _____ Date: _____

Command: _____

Course Number: _____

This questionnaire is designed to alert instructors and medical personnel if any condition that may endanger your health or others during fire fighting training. This information will be held in confidence; and must be completed (front and back) prior to participation in live fire fighting training.

Circle Yes or No

- | | | | |
|-----|----|-----|--|
| YES | NO | 1. | Do you have any fractures, sprains, splints or casts? |
| YES | NO | 2. | Do you have a hernia? |
| YES | NO | 3. | Are you pregnant? |
| YES | NO | 4. | Do you have pneumonia, bronchitis or asthma? |
| YES | NO | 5. | Have you consumed any alcoholic beverages within the last 12 hours? |
| YES | NO | 6. | Did you sleep less than 4 hours last night? |
| YES | NO | 7. | Do you have conjunctivitis and/or any other eye related impairments that may affect your ability to train? (Eye infection)? |
| YES | NO | 8. | Have you had high blood pressure, heart disease, stress related chest pains, or are you currently being treated or monitored for any of the above items? |
| YES | NO | 9. | Have you had any surgery or post-operative procedure within the past 10 days? |
| YES | NO | 10. | Are you in limited/light duty or have you had a tooth extracted within the past 72 hours? |
| YES | NO | 11. | Are you taking any medicine (either prescription or over-the-counter)? This includes herbal supplements. LIST MEDICATIONS; _____ |

JUL 0 8 1994

- YES NO 12. Do you have hypotension (low blood pressure) or hypoglycemia (low blood sugar)?
- YES NO 13. Do you have any open cuts, recent stitches, or new tattoos (within the past 72 hours)?
- YES NO 14. Do you have nasal congestion or an ear/nose/throat infection?
- YES NO 15. Do you have a history of heat related illnesses/injuries?
- YES NO 16. Have you tested positive for Sickle Cell or G6PD?
- YES NO 17. Do you have any other existing condition or injury that might preclude you from participating in training?
- YES NO 18. Are you unable to participate in or complete the PRT (as applicable)?
- YES NO 19. DO YOU NOT meet the height/weight or body fat standards as established in OPNAVINST 6110.1(SERIES)?
- YES NO 20. Do you have any known allergies? If so, list them. _____
- YES NO 21. Have you been diagnosed with Post Traumatic Stress Disorder?
- YES NO 22. Have you been diagnosed with Acute Stress Disorder?
- YES NO 23. Have you experienced any of the following?
- a. Flashbacks, or reliving a traumatic event?
 - b. Shame or guilt associated with a traumatic event?
 - c. Upsetting/Unsettling dreams associated with a traumatic event.
 - d. Attempting to avoid talking or thinking about a previous traumatic event?
 - e. Any of the following: Feeling emotionally numb, feeling hopeless about the future, trouble sleeping, trouble concentrating, memory loss, being easily startled or frightened, not enjoying activities you once enjoyed, hearing or seeing things that are not present?
 - f. Irritability or anger associated with a traumatic event?
 - g. A relationship suffering from your behavior directly related to a traumatic event?
 - h. Self-destructive behavior, such as drinking too much or other harmful behavior?

Student Signature: _____ Date: _____

Qualified: _____ Not Qualified: _____

Signature of Medical Representative: _____