

**ANNEX \_\_\_\_\_ DD FORM 4**  
**CIVILIAN ACQUIRED SKILLS PROGRAM AGREEMENT**  
**ARMY NATIONAL GUARD**

(For use of this Form, see NGR 600-200, the proponent agency is NGB-ARP-E)

**PRIVACY ACT STATEMENT**

1. Authority: Section 12101 and 12103, Title 10, US Code, and Section 301 and 304, Title 32, US Code.
2. Purpose: Specify agreement as a part of enlistment or reenlistment in the Army National Guard.
3. Use: This agreement becomes a part of the individual's military personnel records which provides promotion, training and other personnel management actions. The agreement contained herein are the understanding between individuals enlisted /reenlisted under the Civilian Acquired Skills Program and the Army National Guard.
4. Mandatory Disclosure: Individual could be denied enlistment or reenlistment of not completed.

**TO BE COMPLETED BY THE SERVICE ACCEPTANCE OFFICIAL**

1. In connection with your enlistment/reenlistment in the Army National Guard Civilian Acquired Skills Program (CASP); you are hereby enlisting/reenlisting for the following: (Read skills, criteria and training options in Tables 3-1 and 3-2, NGR 600-200 before signing this form).

**Option 1:** Enlistment/reenlistment for CASP MOS \_\_\_\_\_ with appointment to pay grade \_\_\_\_\_ upon completion of basic training and proficiency training of Initial Active Duty for Training (IADT), minimum 12 weeks.

**Option 2 or 4:** Enlistment/reenlistment for CASP MOS \_\_\_\_\_ with appointment to pay grade \_\_\_\_\_ upon completion of basic training and prerequisite Advanced Individual Training (AIT) and Initial Active Duty for Training (IADT).

**Option 3:** Enlistment/reenlistment for CASP \_\_\_\_\_ with appointment to pay grade \_\_\_\_\_ upon completion of basic training, Initial Active Duty for Training (IADT), followed by at least 48 hours of proficiency training during Inactive Duty Training (IDT)

**Option 5:** Enlistment/reenlistment for CASP MOS \_\_\_\_\_ with appointment to pay grade \_\_\_\_\_ upon completion of basic training (if required), or prerequisite training (if required), or combination of both (if required), and completion of Initial Active Duty (IADT).

**Option 6:** Enlistment/reenlistment for CASP MOS \_\_\_\_\_ with appointment to pay grade \_\_\_\_\_ upon enlistment.

TO BE COMPLETED BY ALL APPLICANTS ENLISTING FOR THIS PROGRAM

2. In connection with your enlistment or reenlistment, the following additional agreements are acknowledged:

- a. I fully understand the training requirements specified for the option selected.
- b. I understand I may be deferred accelerated appointment up to four additional regularly scheduled training assemblies, following my period of proficiency training (Option 3), should it be warranted.
- c. I understand I may be denied accelerated appointment should I fail to demonstrate proper conduct during proficiency training or demonstrate the required level of performance for my CASP MOS.
- d. I understand deferred or denied accelerated appointment will not constitute a breach of contract nor result in an unfilled agreement.
- e. I understand that my subsequent promotion after special CASP accelerated appointment will be in accordance with normal requirements of Chapter 11, NGR 600-200.
- f. I understand my civilian skill as (a) (an) \_\_\_\_\_ will be recognized upon enlistment and during my service in the Army National Guard (For MOS 98G only).

3. I have read and understand each of the statements above. Any other promise, representation or commitment made to me in connection with my enlistment or reenlistment for the civilian acquired skills program is written below in my handwriting, or here waived. (If none, write "NONE").

AUTHENTICATION

Signature of Enlisting Official		Signature of Applicant	
Date	Typed Name of Enlisting Official	Grade	SSN
Unit for which Enlisted		Unit Address	