PLTCE Nomination / Registration Form

Regional Center: GCMC Course: Language: Current Date: **Privacy Act Statement** AUTHORITY: 10 U.S.C. Section 3013, Secretary of the Army, AR 600-20. PRINCIPAL PURPOSE (s): To provide a means for making a class enrollment for language training at the Marshall Center ROUTINE USE(S): To make class enrollments and track student training history at the Marshall Center. The "Blanket Routine Uses" set forth at the beginning of the Army's Compilation of Systems of Record Notices also applies to this system. DISCLOSURE: Voluntary. However, failure to provide all the requested information could lead to rejection of the enrollment request. Last Name: First Name: Middle Name: DOB Title (Civ): Gender: Rank (Mil): Grade (E-6/GS12/MAJ): DD-MMM-YY i.e, SFC, PO PMOS/NEC/Spec: Service Org: Reservist: Reservist (YES): IRR/IMA TPU **ARNG** Unit / Organization Name Company=Co; Battalion=Bn; Brigade=Bde; Infantry=Inf; Regiment=Rgmt; Troop=Trp; Intelligence=Intel; Squadron=Sqdn; Group=Grp, Organization Name: Org Mailing or Street (Physical) Address: State: Zip Code Country: City: **Organization Phone:** Personal email: Work Email: Duty Location (City & State US/Overseas Country): Language Training How Lang Obtained: DLPT Language (Primary): Last DLPT Date: DLPT date or equivalent (if Foreign Mil): Reading Score: Listening Score: Reading Score: Listening Score: 1SG / Supv Phone: 1SG / POC / Supv Name: CLPM / Language Manager: CLPM / LM Phone CLPM / LM Email: *Payment Method: Course costs: \$2,800.00. Payments are due on or before the first day of class. MIPR payments must be coordinated in advance. Other information available at PLTCE.org. Pay.Gov **MIPR EFT** Finance Phone Email: POC: Number: Additional

If using MIPR, enter MIPR number here:

Comments

(SEPT 26)