MINNESOTA ARMY NATIONAL GUARD 34 CAB Aviator Selection Application

APPLICATION DEADLINE: 03SEP2025

INSTRUCTIONS

- 1. This application will be used to establish your eligibility to board for an aviator position within the 34 CAB. It is imperative that you answer all questions accurately and truthfully. Some responses may not be disqualifying but may require more research or documentation. Disclosure of personal information is voluntary, but failure to provide accurate and truthful information could result in your application not being processed. This application will only be available to the chain of command, the appointed board panel, BDE S1 section and BDE medical personnel. If you are unable to provide certain data due to your time-in-service, an MFR is required for each item explaining the circumstances.
- 2. Lying or providing false information will result in permanent disqualification from applying for an aviator position within the MNARNG.
- 3. Do not leave any questions unanswered. Use all the space provided as needed.
- 4. Once complete, submit all documents as **one attachment** in an email to: ng.mn.mnarng.mbx.34th-cab-flight-school@army.mil
- 5. Use this naming convention in the subject line of your email:

LastName FirstName AV APP YEARMONTHDAY

Example: Smith Bob AV APP 20250311

- 6. An email reply will be sent to inform you of the receipt of your application.
- 7. Points of Contact (DO NOT SEND YOUR APPLICATION TO THE POCs):

34 CAB Schools NCO:

SFC Aaron Jacobsen at 651-268-8634, or <u>aaron.j.jacobsen2.mil@army.mil</u>.

34 CAB S1:

CW2 Kimberly Harrsch at 651-282-4499, or kimberly.d.harrch.mil@army.mil.

34 CAB MED:

SFC Nicholas Thorsen at 651-282-4135, or nicholas.w.thorsen.mil@army.mil.

BIOGRAPHICAL DATA

1. Name (Last, First MI):			
2. DODID:	2a. GT Score (must be 110 or higher):		
3. Home Address:			
4. Phone Number:			
5. MIL Email:			
6. CIV Email:			
7. DOB:			
8. Current Age:			
9. Marital Status:	9a. Do you require a family care plan?		
10. Rank:			
11. Years of Service:			
12. Years Active Federal Service:			
13. Deployment History (Location and Years):			
14. Current MOS:			
15. Previous MOS (List All):			
16. Current Unit Assignment:			
17. Unit Address:			

18. Unit POC Name:
19. Unit POC Phone:
20. Unit POC Email:
21. Status (M-Day, AGR, TECH, ADOS):
22. Prior Service History (Branch, MOS, years, location):
23. Level of Civilian Education:
24. Enrolled in Post-Secondary Education:
25. Location (School, City, State):
26. Major, or Focus:
27. Minor:
28. Credits Completed:
29. Rank your airframe selections 1-3 (You may not get what you request due to the needs of the 34 CAB).
UH-60M
UH-60V (MEDEVAC)
CH-47F
29a. Briefly explain the order in which you selected your preferred airframe(s)?
30. Applying to become a commissioned officer or warrant officer?

MEDICAL DATA

1. Have you been diagnosed with any pre-existing or current injuries or conditions, not previously disclosed to the military?				
2. In your lifetime, have you ever been hospitalized?				
3. In your lifetime, have you ever been treated by a behavioral health (BH) professional; diagnosed with a BH condition; or prescribed medication for a BH condition?				
4. Are you currently taking any prescription medications?				
***Do not disclose any medical information. Contact SFC Thorsen to discuss your medical history.				
LEGAL DATA:				
1. Are you a U.S. citizen?				
2. Do you require a Family Care Plan?				
3. Have you ever had any charges filed against you involving alcohol, illegal or controlled substances?				
Explain.				
4. Have you ever been charged with a felony offense?				
Explain.				
5. Have you ever had any other charges filed against you?				
Explain.				
6. Are there any charges against you pending?				
Explain.				

7. Do you currently have a security clearance?			
Level:			
Expiration Date:			
8. Has your security clearance ever been suspended or revoked?			
Explain.			
ADDITIONAL INFORMATION:			
1. If selected, where do you see yourself in 5 years?			
2. How long do you plan on serving in the MNARNG?			
3. If selected to attend as a warrant officer, what track would you request to be considered for?			
4. How did you learn about the 34 CAB Aviator Selection Board?			
5. Any additional information that you would like to share with the selection board.			

REQUIRED DOCUMENTS (INITIAL EACH BLOCK):

1. Aviator Application.
2. At least three letters of recommendation.
3. Minimum 250-word essay titled "Why I Want to be an Army Aviator".
4. Military Biographical Sketch (see template example).
5. Civilian Resume with three non-family references.
6. Security Clearance verification memo from your security manager.
7. Copy of line scores from your ASVAB.
8. APFT, ACFT and Height-Weight history printed from DTMS.
9. Last three OERs or NCOERs
10. Current validated Soldier Record Brief or Cadet Record Brief.
11. All DD-214s, NGB-22s or DD-220s.
12. Current RPAM.
13. SIFT Score.
14. College Transcripts (Commissioned Officers Only).
15. ROTC Camp Evaluations.

READ AND SIGN BELOW

By signing this application, I understand the following:

- 1. There may be factors that could possibly disqualify me from being boarded or considered for an aviator position within the 34 CAB.
- 2. If selected, I may not have a choice in my assigned airframe and unit.
- 3. If selected, I will not have my choice of school dates.
- 4. Upon successful completion and graduation from flight school, I will incur a 10-year mandatory service obligation.

5. If not selected for this year, I may be placed on an order of merit list for the next year	ear.
---	------

Typed Name (Last, First MI)	Digital Signature	Date