**PHOTOJOURNALISM TRAINING – NEW ENGLAND (WINTER)  
ESCORT OFFICERS   
RJ-CT-2501 APPLICATION INSTRUCTIONS**

**HOW TO APPLY**

* Thank you for choosing RJ-CT-2401.
* Please submit a list with your name and the names of any other people, **18 years old+** that may need access to Camp Nett to facilitate your stay.
* Your CO or designated unit representative should email the Base Access/Mode of Travel to [ao.012bea@seacadets.org](mailto:ao.012bea@seacadets.org)
* Email the COTC at [co.012bea@seacadets.org](mailto:co.012bea@seacadets.org) with any questions.
* Updates may be posted from time to time on the website: <https://barque-eagle-seacadets.org/photojournalism> or on the NSCC Training Camp Nett Facebook page as well as pictures of the training.
* Please take the time to review the *Training & Operations Manual* (under Policy) and the *CO/COTC Guidance* (under Training) found at homeport.seacadets.org so we are all on the same page.
* The Volunteer Code of Conduct and the Cadet Code are strictly enforced.
* PLEASE NOTE, IF YOU HAVE A CHILD THAT WILL BE A RECRUIT AT THIS TRAINING, WE PREFER THAT YOU DO NOT APPLY AS AN ESCORT OFFICER. CONSIDERATION GIVEN ON A CASE BY CASE BASIS.

**Contact LCDR Stephen Smith with any questions you may have at** [co.012bea@seacadets.org](mailto:co.012bea@seacadets.org)**.**

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| **PHOTOJOURNALISM - New England – Escort Officer Application**  Email co.012bea@seacadets.org for more information  Mail this form with NSCTNG002 form to: LCDR Stephen Smith, NSCC – 29 Equinox Avenue – Wolcott, CT 06716 | | | | | | | | | | | | | | | | | | | | | | | | |
| PERSONAL INFORMATION | | | | | | | | | | | | | | | | | | | | | | | | |
| Last | | | | | | | First | | | | | | M.I. | | | | Officer Email | | | | | | | |
| Rank | Sex  M F | OPD Completed  **□**101 **□** 201 **□** 301 | | | | | | Home Phone | | | | | Cell Phone | | | | | | | **T‐Shirt Size** | | | | |
| Home Unit | | | | Region | | | Home Address, City, State, Zip | | | | | | | | | | | | | | | | | |
| AVAILABILITY – *please check each day that you are available to staff*  **ALL DATES 21JUNE25-28JUNE25** □ | | | | | | | | | 21JUNE25 □ **Saturday – Student Check in Training Day 1** | | | | | | | | | | | | | | | |
| 22JUN25 □  SUNDAY  Training Day 2 | 23JUN25 □  MONDAY  Training Day 3 | | 24JUN25 **□**  TUESDAY  Training Day 4 | | | 25JUN25 □  WEDNESDAY Training Day 5 | | | 26JUN25 □  THURSDAY Training Day 6 | | | | | | 27JUN25 □  FRIDAY Training Day 7 | | | | 28JUN25 □  SATURDAY Graduation Day | | | |  |  |
| LEADERSHIP & TRAINING EXPERIENCE | | | | | | | | | | | | | | | | | | | | | | | | |
| Primary Billet at Home Unit | | | | | | | | | | | | Other Billets Held at Home Unit | | | | | | | | | | | | |
| Previous Billets Held at NLO‐NE (include Cadet Staff Billets) | | | | | Year | | | | | | Year | | | | | Year | | | | | Year | | | |
| Billet | | | | | | Billet | | | | | Billet | | | | | Billet | | | |
| Please provide some details on other NSCC Trainings you have staffed, starting with the most recent and working backwards | | | | | | | | | | | | | | | | | | | | | | | | |
| *NSCC/NLCC Training* | | | | | *Location* | | | | | | | | | *Year* | | | | *Billet Held* | | | | | | |
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| MEDICAL QUALIFICATIONS – *please attach documentation* | | | | | | | | | | | | | | | | | | | | | | | | |
| □CPR □CPR/AED □First Aid □First Responder □Lifeguard □EMT‐B □EMT‐I □EMT‐P □ Other:\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | |
| INSTRUCTION | | | | | | | | | | | | | | | | | | | | | | | | |
| Please circle any subjects that you feel comfortable instructing  Watchstanding Naval History Rates/Ranks First/Aid/Personal Hygiene Customs & Courtesies  Ship Nomenclature Knots/Lines Leadership Navy Terminology/Military Time | | | | | | | | | | | | | | | | | | | | | | | | |
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| BILLET REQUESTED (see page 3-5 for list of billets) | | | | | | | | | | | | | | | | | | | | | | | | |
| First Choice: | | | | | | | | | | | | | | | | | | | | | | | | |
| Second Choice: | | | | | | | | | | | | | | | | | | | | | | | | |
| Third Choice: | | | | | | | | | | | | | | | | | | | | | | | | |
| Applicant Name (printed) | | | | | | | | | | Applicant Signature | | | | | | | | | | | | Date | | |
| Commanding Officer Name (printed) | | | | | | | | | | Commanding Officer Signature | | | | | | | | | | | | Date | | |
| *Please have your Unit CO endorse & upload to Magellan, this application; Request for Training Authority (Officer) NSCTNG002; and Mode of Travel form. If emailing, send to* [*co.012bea@seacadets.org*](mailto:co.012bea@seacadets.org)*,*  *or mail to the address in the instructions above.* | | | | | | | | | | | | | | | | | | | | | | | | |