

UNITED STATES MARINE CORPS
STATEMENT OF UNDERSTANDING
HEADQUARTERS MARINE CORPS FY13 RESERVE RETRAINING PROGRAM

1. I _____ am affiliating or
(Rank - Last Name, First Name MI)
reenlisting to fill a Billet Identification Code (BIC) with an SMCR unit for
which I am not MOS qualified. _____ Initial
2. I acknowledge that I have read MARADMIN 570 / 12 and meet all
eligibility criteria for this retraining program. _____ Initial
3. If I am applying for a Necessary MOS (NMOS), I understand that I must
complete all required training without a break in between schools. _____ Initial
4. I will incur the obligations of this retraining program , as follows:
a. As a participant in this program, I agree to obtain the required
contractual obligation and affiliate with the following unit
_____ BIC _____ UIC _____ RUC
_____ MCC _____. (FROM SMCR BIC REPORT)
- b. I understand that my Mandatory Drill Participation Date will be
adjusted to coincide with the length of the school; 24 months of contractual
obligation if the school is 12 weeks or less, 36 months of contractual
obligation if the school is greater than 12 weeks. I understand that my
obligated time starts the day I report to active duty for attendance at my
assigned retraining school. In accordance with MARADMIN 570/12, failure to
satisfy all retraining requirements set forth under this program, may
disqualify further participation.
- c. If I incur a period of authorized non-availability (as determined by
the Commander, Marine Forces Reserve), I will extend my period of service
obligation in the SMCR in order to fulfill my 24-month or 36-month
obligation.
- d. I understand that failure to fulfill my obligations under this
program, may disqualify me from further participation. _____ Initial
5. Program approval will be revoked for the following reasons:
a. Failure to join the SMCR unit within 45 days of the approved training
request.
b. Selection to Staff Sergeant or Major, unless my retraining request is
for the 0202, 0211, or 0241 MOS.
c. Failure to attend the scheduled training without requesting a
reschedule per the current MARADMIN; or due to rescheduling, failure to
attend the scheduled training within 18 months of joining the unit as
directed by MCO 1001R.1K.
d. Failure to complete training due to disciplinary action or academic
failure.
e. Execution of an inter-unit transfer (IUT) without prior approval from
CMC (RAP).
f. Dropping to the IRR without prior approval from CMC (RAP). _____ Initial
6. Commuting distance. I understand that as a result of MOS retraining, I am
waiving the commuting distance requirement per MCO 1001R.1K. _____ Initial

7. Understanding. I understand each of the statements above and understand that they are intended to constitute all promises or commitments made to me in conjunction with my participation in the SMCR Retraining Program.

_____ Initial

PRINTED NAME AND GRADE OF MARINE SIGNATURE OF MARINE DATE

PRINTED NAME AND GRADE OF PSR/CAREER PLANNER SIGNATURE OF PRS/CAREER PLANNER DATE

PRINTED NAME AND GRADE OF GAINING UNIT WITNESSING OFFICER SIGNATURE OF WITNESSING OFFICER DATE

CMC (RCT) RIT APPROVAL ENDORSEMENT

1. Your request for retraining has been denied due to _____.

CMC (RCT) RIT INCENTIVES PROGRAM MANAGER NAME SIGNATURE DATE

CMC (RCT) RIT OIC NAME SIGNATURE DATE

2. Your request for retraining has been approved. The approved Statement of Understanding shall be filed on the document side of the Marine's Service Record Book.

CMC (RCT) RIT INCENTIVES PROGRAM MANAGER NAME SIGNATURE DATE

CMC (RCT) RIT OIC NAME SIGNATURE DATE