PORTLAND, OREGON, MEPS
PROCESSING SECTION
STANDARD OPERATING PROCEDURES
October 1, 2013

1) **PURPOSE:** To outline Portland, OR, MEPS processing policies and procedures.

2) **REFERENCES:**
   
   a) Army Regulation 601-270, Military Entrance Processing Station (MEPS)
   b) TouchPrint Enterprise Live Scan System Crossmatch ID 1000 Ten-Print Scanner Manual
   c) Portland, OR, MEPS Policy Memorandum 2-1, Portland MEPS Processing Requirements
   d) USMEPCOM Regulation 55-2, Recruit Travel
   e) USMEPCOM Regulation 601-23, Enlistment Processing
   f) USMEPCOM Regulation 680-3, USMEPCOM Integrated Resource System (USMIRS)
   g) USMIRS System Navigation Manual

3) **APPLICABILITY:**

   The following procedures apply to all Portland, OR MEPS personnel, Service counselors, and recruiters.

4) **RESTRICTIONS:**

   Do not deviate from this SOP and the above listed references. Recommend all changes to the Processing Supervisor and/or Operations Officer.

5) **RESPONSIBILITIES:**

   Responsibilities are in accordance with (IAW) all listed references.

6) **OPERATING SCHEDULE:**

   The MEPS is normally open Monday through Friday and selected Saturdays from 0600 to 1700 for processing and until 1930 for night testers (night testing will stop accepting applicants at 1700 if projected and 1600 if walk-in). There is no night testing on Friday. The MEPS is closed on all Federal holidays and designated non-processing, and training days as listed in the MEPS quarterly activity schedule.

7) **QUALITY REVIEW PROCESS (QRP):**

   a) QRP personnel will be chosen for their accuracy and attention to detail. Ideally, they should be subject matter experts and be familiar enough with QRP procedures to check other functional areas besides their own. Liaisons are encouraged to observe QRP to get more familiar so they can do a better pre-QRP check.

   b) Projections are due daily at 1300 two business days prior to processing (except for Marine Corp 24-hour projections). All packets/prescreens are subjected to a very thorough QRP process
beginning at NLT 1330 where QRP personnel check all records and list all discrepancies in detail. After QRP is complete, discrepancy logs will be taken to each service for signature. Services will have until 1100 the following day to fix any discrepancies. Any discrepancies not fixed will have the projection deleted from the system and the name and information (except SSN) blacked out on the 727PL.

c) All Marine Corps 24-hour projections will be reported in USMIRS no later than 1300 the day prior to processing. All Marine Corps 24-hour projections must have a DD Form 2807-2 with no issues (“YES” responses other than items 12, 61, and 73), and will have no attached medical history. Marine Corps will enter “-MC24P-” in the “remarks” section of the USMEPCOM Form 727-E (Processing List) in USMIRS. The “-MC24P-” will display on the printed hardcopy “remarks” section of the UMF 727-E PL. After QRP is complete, discrepancy logs will be taken to the Marine Corps liaison for signature and the liaison will have one hour to fix any discrepancies. Any discrepancies not fixed will have the projection deleted. Applicants projected after 1300 as a walk-in, will contain an entry of “-MC24W-” in the UMF 727-E “remarks” section and will display on the printed hardcopy “remarks” section of the UMF 727-E PL.

d) After all discrepancy projections have been deleted, QRP personnel will provide packets and labels for all projected applicants not requiring a night test to the service NLT 1700 each day. The Control Desk clerk (CDC) will annotate the 727PL as follows:
   Packet received by the Service: X circled in Red
   Packet or prescreen received by Testing: red check mark by prescreen/packet marking
   Packet not present or in medical, no mark
   For night testers, the Testing personnel will place all packets and pre-screens, including no-shows, in the operations files room at the end of their shift.

e) CDC will highlight special tests on the 727PL with a pink highlighter. Service will be responsible for annotating test type on the labels (i.e. special tests, SDP’s, etc.), and any other markings needed (i.e. III for Air Force, or Airborne for Army).

8) SERVICES GUIDELINES FOR SUCCESSFUL QRP:

a) Prescreens must be approved, with all pages date stamped, and all additional documents stamped and initialed by Medical personnel. Applicants arriving on processing day with new or unapproved paperwork will be referred back to their Service, and turned away for additional information not previously previewed.

b) Prescreens may not be more than 60 calendar days old. Prescreens are dated from the date the applicant signs. Expired prescreens will be returned to the Service without action, and a new prescreen must be prepared. If the prescreen is not “clean,” applicant will not process that day.

c) Prescreens must be signed by the recruiter. If the recruiter does not sign, the paperwork will be marked “incomplete” and returned to the Service.

d) Seventeen year old applicants will have the DD Form 1966/5 and the 2807-2 signed and dated by parents. The 2807-2 only needs one signature, but the DD1966/5 requires both parents to sign, or have the reason annotated.

e) Court documents do not need to be attached to the DD1966/5; the case number will suffice.
i) Death certificates do not need to be attached to the DD1966/5; a statement will suffice.

g) Guardianship papers, or adoption papers, including ward of the state, only need a statement. NOTE: Oregon and Washington do not recognize marriage as emancipation.

h) For prior service, Service must turn in a DD214 with RE code and reason for discharge along with the prescreen. If the applicant has been in more than one Service, we require the DD214 or NG22 from the last period of service. In-service applicants must have a Conditional Release.

i) Braces letters need to be turned in along with the prescreen.

j) If the prescreen was disapproved, Services must turn in a waiver from their higher headquarters asking for MEPS to conduct a physical in order to have their applicant process through medical.

k) All packets must be turned in with the 727PL (except packets pending HIV/DAT results), even if they are only projected for Delayed Entry Program (DEP)-only. This is for accountability/check-out purposes.

l) Packets requested from other MEPS must be in hand prior to projection if medical documentation is present. Applicants who have tested at other MEPS must have had their paperwork requested far enough in advance for MEPS to receive a scanned copy of the USMEPCOM Form 680-3AE.

m) Packets on letter read are not eligible for projection. Service must have the letter read returned and authorized from the MEPS physician or the Waiver authority prior to scheduling for processing.

9) **MORNING OPENER/MORNING HELPER:**

   The control desk will have a minimum two personnel manning at all times. Hours are as follows:

   | Opening Human Resources Assistants (HRA): | 0600 – 1430 |
   | Transportation Assistant (TA)/Opening Lead HRA (LHRA): | 0700 – 1530 |
   | HRAs/Closing LHRA: | 0830 – 1700 |

   Morning Opener/Medical personnel will open the applicant baggage door and turn on the lights and projector in Room 166. The opener will be outside at 0600 and will begin the morning brief.

10) **MORNING BRIEF:**

   a) The morning opener will brief the applicants on the security screening process. An applicant will not be allowed to enter the building with a weapon. If a weapon is discovered it will be given to the recruiter or Service liaison. Depending on the circumstances the MEPS Commander may decide to stop the applicant’s processing. The morning opener will also ensure there are no recruiter vehicles or processing applicant’s vehicles in the reserved or family parking spots, and if there are, the recruiters and/or applicants will move their vehicles to the street for parking.
b) The morning opener will separate the applicants into two lines. The first line will include all shippers, medical inspects, consults, special test only, or any applicants that do not require a full medical examination. The second line will include all applicants requiring a full physical. All applicants will turn off their cell phones and store them in their baggage, and be briefed that they will not be allowed to have cell phones on the medical floor and will be allowed to get them out after they finish with medical. Applicants will be told to remove hats and store all coats, sweatshirts, hoodies, or sweaters in the baggage area until finished with medical.

c) The first line will enter the building, go through the security screening process, store their gear in the baggage storage area, and go to their Service liaison to get their ID name tag and medical packet. Once the first line is through, the second line will enter the building and follow the same procedures, then report to the control desk for check-in and/or biometric enrollment. The morning opener will brief the applicants to bring their photo ID (driver’s license, military ID, school ID, or passport) and Social Security Number (SSN) card (original, copies will not be accepted) readily available for biometric enrollment.

11) CHECK-IN/BIOMETRIC ENROLLMENT:

a) All applicants will check in with their Service liaison in the morning. The Service liaison will greet the applicants, give them their ID name tag and medical packet and ensure that applicant tags have been marked with any special tests or any medical procedures that need to be done out of the ordinary. Services will ensure all applicants have all paperwork necessary to process, including original SSN card and photo ID if biometric enrollment is needed. Applicant will be directed to the hallway to check in with the Medical NCOIC or designated Medical representative.

b) Medical NCOIC or designated Medical representative will greet the applicants, review the packet, and direct the applicant flow. Shippers will be sent to the medical briefing room to receive the Commander’s Shipper brief. Applicants requiring an inspect or consult will be sent to the medical front desk to check in.

c) Applicants requiring a full physical will be sent to the control desk. Applicants who are not biometrically enrolled will be sent to the orange line/operations line and provided a laminated copy of the Privacy Act Statement. The CDC will ask applicant if they have read and understand the Privacy Act, and retrieve the laminated copy from them. The CDC will biometrically enroll and check-in the applicant to the building. Applicants who are already biometrically enrolled will wait in the blue line/operations line for check-in to the building. Once applicants are checked-in to the building they will be directed to the yellow line/medical line for medical check-in. Once the applicants have been checked into medical they will be directed to either the medical briefing room or the pre-oath briefing room to receive the Commander’s Welcome brief. This brief will be given by an officer, or an E-7 or higher. Normally the Commander’s Welcome brief takes 10-15 minutes to complete and will cover all information required by USMEPCOM. After the brief, the applicants will receive the medical brief.

d) Upon greeting the applicant, CDC will locate the service 727PL, locate the applicant’s name and highlight the name (and only the name) in yellow to verify that the CDC has physically seen the applicant, and to ensure applicant has been projected for the correct Service.
e) For biometric enrollment the CDC will verify that the applicant’s name and SSN in USMIRS is exactly the same as on the Social Security card, and if not, make the necessary changes. Non US Citizens will present original Immigration and Naturalization Services (INS) cards for identification if the name is different than the name listed on the Social Security card. CDC will reprint all medical documents, packet label, and name tag for any changes, verify the color of the medical packet is still correct, and ensure applicant is still projected in USMIRS. CDC will contact the sponsoring Service to advise them of the incorrect SSN. Court documents or any other form of identification do not override the Social Security card with the exception of the INS card. After verification of documents, applicant will sign Block 21 to signify personal data is correct. Biometric enrollment will then be completed to the highest extent possible, to include photos. This step may be delayed if there are problems with capturing photos or if the number of personnel to enroll is excessive and would delay mission accomplishment. Biometric enrollment will then be completed at the earliest possible time.

f) If biometrics are down or there are problems with capturing data, CDC or Section Supervisor will submit a MOC ticket to report the connectivity problem. All applicants not biometrically enrolled will have their information checked and “BE” will be written in red on their name tag so enrollment may be accomplished as soon as the system is running.

g) Previous biometric enrollment: All previously biometrically enrolled applicants will be directed to the blue line/operations line for check-in for accountability and to obtain signature, if needed. Applicants who have had drastic changes to their appearance will be re-photographed. If only partial biometric enrollment has been accomplished, CDC will complete the enrollment at that time. CDC will highlight applicant’s name (and only the name) in yellow to indicate they have physically seen the applicant.

h) Prior to USMIRS check-in, CDC will ask the age and prior service status, verify necessary paperwork is present and ensure that there are no “N” statuses to remove. Services are able to remove some “N” statuses, and should be urged to do so. CDC will verify and remove any remaining “N” statuses. Once check-in is completed, name and paperwork verified, and applicant highlighted on the 727PL, the CDC will direct the applicants to the yellow line to check in with Medical personnel.

NOTE: Applicant does not have to be projected in order to be biometrically enrolled. If personal data exists in the system, an applicant may be enrolled any time he or she is in the area for convenience, and better customer service.

12) LATE ARRIVALS:

a) Liaisons may schedule late arrivals if the applicant does not require a full physical, is here for testing, fingerprinting, DEP/Accession only, service processing only, or if they are scheduled for an inspect and will be here for the “additional information” call from Medical. Before scheduling the late arrival the liaison must get approval from the Processing Supervisor or the Medical NCOIC. All other applicants will arrive NLT 0600 when the doors open.

b) The Processing Supervisor or Medical NCOIC or their representative, will question all other late arrivals to ascertain the feasibility to continue processing. They will take weather and traffic conditions into consideration and balance that against mission needs. The applicant will be turned away if no feasible reason exists, and Services will reschedule them for another day.
13) WALK-IN APPLICANTS:

a) All walk-ins must be submitted with an exception to policy (ETP) and 727PL on the day of action. Each Service is allotted a maximum of 2 walk-ins per day unless the MEPS is at maximum capacity.

b) Service liaisons may not “borrow” walk-ins from other Services.

c) Walk-ins must have either an approved pre-screen, or the pre-screen will be clean, meaning there can be no “yes” answers except in the following blocks:

12. Wear contact lenses
61. Braces (Must have braces letter from orthodontist)
72. Do you smoke?
*Block 34. Are you over 40? This should always be scheduled in advance because the applicant must fast. This should not be a walk-in except in rare circumstances.

d) Common sense will be used for walk-ins. If a name or SSN is projected incorrectly, the 727PL will be re-printed, but this is considered an ETP and not a walk-in. Walk-ins numbers are for additional personnel added to the processing count, not paperwork or administrative errors. To clarify: ETPs are still required. However, these ETP’s will not count against the service’s walk-in number. The mission is to process, not turn away merely because the number is exceeded. If we can process the applicant without causing undue hardship to Medical, Testing or Processing, we will do so.

14) VISITORS:

a) Visitors will be greeted upon arrival and asked to check in with the CDC to receive a visitor badge. If there are a number of applicants waiting, or check-in is still going on, CDC will ask the visitors to wait and state that they will assist them as soon as possible.

b) CDC will maintain clip-on badges at a convenient location to log visitors in. Visitors will provide a photo ID (driver’s license, military ID, school ID, etc.) in order to get a visitor badge, and will be told that it will be returned when they depart the building.

c) Visitors arriving very early will be instructed that the first ceremony is normally between 0900 and 1000 for shippers, and 1100 to 1200 for deppers and asked if they would care to wait, or go eat breakfast before they check in.

15) MAXIMUM DAILY CAPACITY/ALLOCATION (MDCA):

a) USMEPCOM has calculated the maximum number of applicants that can reasonably be processed on any given day. Utilizing historical data, each Service has a slice of that processing number, and ideally should try to maintain their projected number of contracts to no more than that maximum number. However, the Services are not capped unless the Station exceeds its overall total.

b) Service allocations are as follows (contracts/full physicals):

<table>
<thead>
<tr>
<th>Service</th>
<th>Contracts</th>
<th>Full Physicals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>11 / 10</td>
<td>National Guard</td>
</tr>
<tr>
<td>Navy</td>
<td>9 / 8</td>
<td>Air Force</td>
</tr>
</tbody>
</table>
c) As stated above, Services may go beyond their allocation as long as the projection is turned in on time for QRP. This may be done without any ETP unless the numbers reach the maximum capacity. Once maximum capacity is reached, Services will be asked to scale back on their projections until the contract or physical capacity is within the MDCA.

d) Shippers are not counted against the Service allocations above. Applicants who conduct a full physical will only count against the physical capacity. Applicants, who are working with the Service for renegotiation, etc., will not affect either of the processing numbers.

16) LUNCH LOGS:

All Services will turn in lunch logs to the CDC in the morning as soon as feasible, but normally no later than 0700. The morning opener and helper will work together to ensure the lunch log is as accurate as possible, going by name by name for each Service. They will ensure that no “no show” applicants have inadvertently left on the logs, and call the numbers in to Subway restaurant no later than 0730 daily. Special lunches (vegetarian) will be annotated and ordered when marked. CDC will complete the lunch log with the name of person calling, the time called, number of lunches ordered and name of person at Subway who took the call.

17) PRIORITY OF PROCESSING:

a) Early shippers (departing same day)
b) Late shippers (departing next day)
c) DEP-in / Accession
d) Front Loads

18) APPLICANT ACCOUNTABILITY:

Once the lunch roster has been processed and no-shows highlighted in green on the 727PL, the Processing Supervisor or designated representative will check the lodging logs against the 727PL no-show roster, making note of any applicant who signed in for lodging but did not show up at the MEPS. A status report will be sent to the Commander, XO, OPSO and SEA. Negative reports are also required.

19) WORKING NUMBERS FOR DEPPERS AND SHIPPERS:

CDC will do a number check on applicants and ensure that everyone listed on the 727PL will be processing. CDC will ensure that no prior service is marked to enter into the DEP and that no Air Force Reserve or Air Force National Guard are projected to DEP. CDC will count the number of processors and shippers for each Service, and annotate them on the processing board. Opener/Helper will also fill out a processing log for daily status listing all numbers, Same Day Processors, number of lunches ordered, and any issues.

20) WHITE BOARD:

a) There are two white boards located behind the control desk. The first one is a by-name listing of personnel actively processing. CDC will list last name, “S” for shipper, “D” for depper, and
“A” for accession, what Service the applicant is from and if an applicant is National Guard then either an “O” or “W” indicating Oregon or Washington, time for Phase 1, Phase 2 and time checked into the ceremony room. Once the ceremony is complete and the contract prints out, CDC will erase the name and properly annotate the 727PL.

b) The second white board keeps an ongoing list of numbers for all personnel processing from each Service that have not come across to the control desk for Phase 1. CDC will update the boards each time a shipper or deepper arrives at the control desk to be processed.

21) **FRONT LOADING APPLICANTS:**

a) We encourage all Services to front load applicants. Service will identify personnel who have completed medical, ask them to wash their hands with cold, soapy water, and direct them to the CDC and state that they are ready for fingerprints and DD93 processing (or front loading).

b) CDC will print a 680-3ADP, place it in a blue folder, and direct applicants to have a seat in front of room 126. An HRA will call an applicant back, verify personal data, and ensure no other fingerprints have been taken but will not enter an automated submission into USMIRS. If the applicant will be swearing in, the HRA will complete the DD93 without printing the document. (a DD93 is not needed for prior service, Coast Guard, Air Force Guard/Reserve or officer candidates.) The HRA will then read Article 83 to the applicant, capture fingerprints, save prints, and send the applicant back to their Service for further processing with a blue dot on their name tag. No automated submission will be entered into USMIRS until interview, and no prints will be sent until the applicant completes the swear-in ceremony (except for officer candidates, prior service, and special service requests).

c) Cut off time for front loading is 1430. No ETPs for time are authorized for non-frontloaded applicants; they must be at the control desk prior to 1530 in order to swear in that day.

22) **DEP-IN PROCESSING:**

a) The CDC will biometrically track all applicants in USMIRS and send applicants to their respective Service upon completing medical processing.

b) The CDC will annotate time on the 727PL when the first (full physical) working copy of the DD2808/2807-2 for each Service is received from medical using the qualification code located in Block 79. This is to ensure that the requirements for a 6-hour window are met for each Service. If the original packet is returned, CDC will annotate the qualification code on the 727PL, check the record out to the Service in USMIRS, and send the packet back to the Service for further processing. CDC will file the stapled working copy of the physical alphabetically in the control desk accordion file and direct the applicant to take the unstapled copy back to the sponsoring Service.

c) CDC will annotate the USMEPCOM 727PL and the white board once an applicant returns from the liaison office and is ready to be processed, and will remove the running number from the processing list. The applicant will biometrically sign in to OPS. On the white board, CDC will note the last name of the applicant, type of contract (S - Shipper, D - Deepper, A - Accession), SPF, and time in for Phase 1. When the applicant returns from Phase 1 with a Red “1” and blue dot (indicating they were fingerprinted) on their tag, CDC will direct them back to the Service and annotate the Phase 2 block with the time. When applicant comes to the control
desk with an orange dot on their name tag, and is ready for the enlistment ceremony, CDC will check applicant into the ceremony room (if no ceremony is on-going), annotate Phase 3 block with the time, and direct the applicant to the briefing room to complete the Customer Satisfaction Survey (CSS).

d) CDC will direct all non front loaded applicants to wash their hands in cold soapy water, return to the control desk and listen for his/her name to be announced on the paging system to report to a processing station.

e) An HRA will call an applicant to a processing station. HRA will again verify personal data against the DD1966 on all front loaded applicants, begin with the interview, and proceed to step (h). Otherwise, the applicant will be biometrically processed by the one-stop processing method, utilizing USMIRS and required documents from the processing packet IAW references A and E. HRAs who process an applicant who discloses additional information will determine whether the disclosure requires Service involvement only or Service and Medical involvement, and place the applicant in an admin hold using USMEPCOM Form 601-23-E. HRA will initial and date the form, and provide a copy to the Processing Supervisor. The HRA will direct the applicant back to their Service liaison for determination of eligibility. The white board will be annotated A1 in the Phase 1 time slot. If the applicant is cleared by the Service and/or Medical, he/she will be allowed to continue processing. If the applicant is cleared, A1 will be erased, and the new time annotated. If processing is halted, the name will be erased from the white board, and the 727PL will be properly annotated showing that the applicant did not swear in.

f) Once finished with the interviewing process, the HRA will ascertain whether there are already valid prints in the system. If fingerprints have previously been submitted and an OPM case number exists, the HRA will contact the Service to determine whether fingerprints need to be resubmitted. If fingerprints are required, the HRA will direct applicant to wash his/her hands and report to the fingerprinting area. The HRA will enter an automated “A” ENTNAC submission and list all AKA’s prior to printing.

g) For previously unclassifiable prints, the HRA will adhere to procedures for reprinting with an existing OPM file number IAW Ref E.

h) The HRA will direct the applicant to mark a red “1” on their name tag upon completion of the fingerprint process, the HRA will also give applicant a blue dot to put on their name tag, and direct applicant to report to the CDC, who will annotate the white board and send them to their Service to state he/she is ready for Phase 2. HRAs will return all Service paperwork with the applicant unless they are processing for Army Reserve. Army Reserve applicants will receive a copy of their DD93 to take to their Service, and the processing HRA will turn the packet in to the break-down clerk to process and issue orders. Applicants will have their contracts biometrically signed by the Service counselor. Once the applicant contract has been biometrically signed by the applicant and the designated Service counselor, the Service will place an orange dot on the applicant’s name tag and direct the applicant to report to the control desk and state that they have completed Phase 2.

i) CDC will quality review each applicant’s contract for biometric signatures and ensure that USMIRS shows Phase 2 processing has been completed. CDC will biometrically sign the applicant in to the ceremony room and place the last name and time on the white board. If a ceremony is ongoing, the CDC will instruct the applicant to wait until they are called up to check into the next ceremony.
j) At 1030, or when directed by the lunch personnel, the CDC will announce lunch for the applicants. The page should be: “Attention in the MEPS, lunch is now being serviced in room 131. All applicants who are not actively processing may go to lunch. Check out with your Service liaison before going to lunch”.

23) SAME DAY PROCESSORS (SDP):

SDP is done the first working day of the week. After SDPs have checked in with their Service liaisons and with the CDC, they will receive the Commander’s Welcome brief and complete the medical brief, filling out all necessary paperwork for their physical. Upon completion of the medical brief, SDPs will check in at the control desk and be biometrically signed into Testing. Once testing is complete, the CDC will ensure Testing has biometrically checked all same day processors into their prospective Service or into medical to be processed IAW Ref. A and E. CDC will record test scores in red on the 727PL, fill out and sign a SDP sheet, indicating qualified or unqualified. The CDC will direct the applicant to their respective Service to determine whether or not medical will be required. Applicant must receive a score of 10 or more to be eligible to process (Note: there are exceptions for specific jobs for each Service – however, CDC will mark “Not Qualified” on the SDP sheet and the Service will request an exception if one is needed.). If applicant is not qualified for medical processing, ensure Medical receives the packet so that the specimen numbers can be voided out. CDC will draw a line through medical/DEP/access on the 727PL. Qualified applicants will be directed back to medical for completion of their physical. There will be no more than 12 SDPs on the established same day processing days.

24) ENLISTMENT CEREMONIES:

a) Upon arrival each morning, Commander or Enlistment Officer will oversee the workload and determine the times for ceremonies (normally every hour and a half to allow for family member arrival). Shippers will be first consideration, and flight times will determine the first ceremony time. Special consideration will be given for requests for additional ceremonies.

b) Fifteen minutes prior to the scheduled ceremony time, CDC will tell the Enlisting Officer how many personnel are ready for a ceremony and obtain permission to conduct a pre-enlistment brief IAW Ref. E. CDC will conduct a pre-oath briefing followed immediately by the oath of enlistment. The briefer will read Articles 83, 85 and 86, and Restrictions on Personal Conduct in their entirety to the applicants and ensure there are no questions. The briefer will give a block of instructions on the proper way to stand at attention, parade rest, and how and when to raise their right hand at a 90 degree angle, and to address the officer as “Sir” or “Ma’am”. Briefer will go over the oath of enlistment, and inform the applicants that they have the option to say “swear or affirm” and not repeat “So help me God” if that is their preference. The briefer will ask applicants if they have any visitors.

c) Guest officers are authorized to administer the oath of enlistment; however, the contract will be signed biometrically by the MEPS officer. If desired, CDC can produce a paper copy of the DD Form 4 contract for the family for scrapbook purposes, but the biometric signature must be obtained so the DEP/Accession data does not fall out of the USMIRS system.

d) Visitors are invited to witness the actual oath of enlistment ceremony. Briefer will ask applicants if they have any objection to being photographed. If any applicants do have any objection, a simulated ceremony will be utilized to obtain photos, if desired. If there are no
objections, visitors may take photos/videos. Applicants will be advised to move their name tag below their waist so that it does not show in any pictures. Applicants will be advised to move name tags back after all photos have been taken.

c) After an enlistment ceremony has taken place and the applicant and enlisting officer have biometrically signed the contracts, the applicant will be directed to the CDC to receive their printed contract. Shippers will not receive their contract, but will be checked out of the system and given the approximate time for the shipper briefing. CDC will MOT the applicant and direct the applicant to draw a line through their name tag utilizing a pink/red highlighter to indicate that they have completed Phase 3, and have been MOT’d from the system. CDC will take shipper contracts to the break-down personnel for inclusion in shipper packets. Non-shippers will be directed to their Service with their contracts for further processing. CDC will retain one copy of the contract for Army Reserve applicants and ensure they are matched up with the packets held for break-down and issuance of orders. CDC will instruct the applicant to return the other copy to their Service.

f) CDC should ensure red carpet treatment and congratulate the applicant on their achievement prior to sending the applicant to their Service as a sign of respect for the applicant and their family members (if any). CDC should ensure that tissues are available at the control desk for family members who get emotional, and offer them congratulations as well.

25) SHIPPERS:

(Except Army National Guard). Time guidelines will be in strict accordance with Ref. D and E.

a) Once the applicant has completed medical processing, the Medical front desk clerk will issue medical packets to the applicant and direct them to the control desk. The CDC will annotate the USMEPCOM 727PL, utilize USMIRS to check them out to the Service, and direct them to their liaison office for final processing. If the shipper has a disqualification or has been placed in a "J" status, note that on the shipper log and advise the TA of a potential non-shipper.

b) Service liaisons will ensure medical packets are included in the shipping packet when hand carried by the applicant, or given directly to the packet breakdown clerk for copying prior to shipment.

c) The CDC will highlight the name of the shipper on the USMEPCOM 727PL in yellow once an applicant returns from their liaison and is ready to be processed. Applicant will biometrically check in to OPS. CDC will verify the basic training location and valid photo ID. Note: Applicant must have a government issued photo ID (A DEP ID issued by the Service or a paper copy of a driver’s license is acceptable provided it is not expired). CDC will annotate on the white board the name, SPF, and time the applicant enters Phase 1, and take the number off the processing board. (Note: Marine Reserves and Navy Reserves do not take the oath of enlistment on ship day – their names do not need to go on the white board, but all other processes apply)

d) When an HRA calls the shipper to a processing station, the applicant will biometrically sign in and be processed by the one-step processing method utilizing USMIRS and required documents from the processing packet IAW Ref. A and E. If a shipper discloses additional information, processing will be terminated until the additional information is documented and cleared IAW Ref. D and E. The HRA will ensure the TA has immediate knowledge of any additional
information disclosure for possible disqualification. Group Pre-Accession Interviews (PAI) are authorized and encouraged. HRA will ensure all applicants are briefed not to answer questions out loud in a group environment. Anyone with a “Let’s Discuss” mark will be called back to an HRA booth for a one-on-one interview to determine the nature of the “Let’s Discuss” remark. Any potentially disqualifying information will immediately be given to the TA, and the HRA should call the Service to advise them of the potential problem and send the applicant back.

e) Upon completion of processing, applicant will biometrically sign the contract and DD93, and HRA will direct the applicant to mark a red “1” on their name tag and report to the CDC. CDC will mark the time on the white board and send applicant back to their Service liaison and state that they are ready for Phase 2. Service liaison will place an orange dot on the applicant’s name tag once the contract has been biometrically signed and direct the applicant to report to the control desk and state that they are ready for Phase 3. CDC will verify Phase 2 completion, biometrically sign applicant into the ceremony room, and annotate the time on the white board.

f) HRA will forward the entire packet to the breakdown area. HRA will staple a copy of the interview sheet (UMF 601-23-5-R-E) to the back the DD1966 page 1 and give it to the quality control clerk. TA will provide orders to the break-down clerk at 0715 on ship day. The break-down clerk will prepare the packets IAW Ref. D and E, and Service break-down sheets.

g) When all proper steps have been completed, CDC personnel will set up an enlistment ceremony IAW Paragraph 22.

h) Following the enlistment ceremony, CDC will forward the contract to the QC/break-down clerk for quality review and distribution IAW Ref. D and E.

i) The travel brief will be conducted by a qualified TA IAW Ref. D and E after all shippers for each time frame or destination have completed processing. Travel packets will be hand carried in their own sealed packet by each individual. The TA will appoint a group leader for each group and that person will be the only designated spokesperson for the group. The group leader will be given a separate set of instructions outlining what to do in case of a delay or an emergency.

j) The TA will page all shippers by location and instruct them to line up in the hallway in front of room 113. Shippers will receive a through briefing and receive their packets. The TA will print meal checks for all eligible shippers, and print a meal check register for applicants to initial to verify receipt. TA will collect name tags from all shippers prior to their departure to the airport (or to the hotel for next day shippers). TA will ensure lodging logs are sent to the hotel for next day shippers.

26) SHIPPERS: ARMY NATIONAL GUARD:

a) The CDC will annotate the name of the shipper on the 727PL in yellow highlighter once the shipper returns from the Army National Guard counselor and is ready to process.

b) The CDC will verify basic training location, valid photo ID, and ensure the information on the DD93 is accurate, the UIC of the training station is annotated, and there is a valid phone number for the main beneficiary (If there are changes, CDC will fix them if practical, and if
mission does not permit, will take the packet back to the HRA area and have HRAs fix the paperwork and finish processing the applicant.

c) The CDC will enter the accession data and print two 680-3ADP sheets, annotate the 727PL, MOT the shipper in USMIRS, and have the shipper mark through his name tag with a pink/red highlighter. CDC will take the packet to the breakdown clerk for quality assurance and presentation to the TA for proper distribution. Each packet will be sealed individually.

d) If there are any changes/problems with a packet, shipper will be processed by an HRA as stated above, to include MOT and delivery of the packet to the breakdown clerk.

e) Upon completion of processing, shipper will be directed by the CDC/HRA to listen for his/her travel brief to be announced over the paging system. Shippers will be paged by location and instructed to line up in the hallway in front of room 113. TA will collect name tags from all shippers prior to their departure to the hotel.

27) SHIPPERS: HOMETOWN/DIRECT SHIPPERS:

a) All Army Reserve shippers are now shipped utilizing the hometown shipper option IAW USMEPCOM Memorandum dtd 13 March 2009. Army National Guard utilizes the Direct Shipper program to a great extent, and these instructions will also pertain to those direct shippers.

b) Preparation: Hometown Shippers: Upon completion of accession, the break-down personnel will receive the processing packet and shipper contract. Once HIV/DAT results have been received, orders will be cut, the medical packet will be included in the packet, and the packet will be made “shipper ready” and signed out to the Service. It is the Service’s responsibility to ensure the packet is sent in a timely manner to the applicant to ensure all shipper deadlines are met.

Preparation: Direct Shippers: Upon completion of accession, the packets will be returned to the Army National Guard liaison. Thirty days out, when direct shippers are identified, liaison will bring packets to the TA or designated TA for orders. TA will cut orders and hand packets over to HRA or designated TA for quality check, and the packet will be made “shipper ready”. QRP personnel will conduct a quality check on each packet, ensure HIV/DAT is annotated, ENTNAC results have been received, and no “N” statuses exist. Packets will be annotated that no medical is required by going into the Personal Data Screen, Alt – down arrow past the Testing screen to the Medical screen, and putting an “N” in the medical requirement block. Packet will then be signed out to the Service. It is the Service’s responsibility to ensure the packet is sent in a timely manner to the applicant to ensure all shipper deadlines are met.

c) On ship day, it is the Service’s responsibility to ensure the TA knows that the shipper has successfully shipped. TA will inform the CDC and they will enter accession data, run a 680-3AE for the service, and check the packet off-site shipped in USMIRS. TA will annotate the hometown shipper log and inform CTO of shipment.

28) QUALITY CONTROL CLERK PROCEDURES:

a) Once a packet is received from the packet breakdown clerk, the quality control clerk will review each packet for completeness and correctness IAW Ref. D and E. The quality control
clerk will receive shipper orders from the TA, make copies, and insert orders and enlistment contracts into the shipper packets.

b) Once the packet is complete, the quality control clerk will take the packets back to the sponsoring Service for verification, and return residual copies. Once the Service verifies the packet, a Service representative will return the verified packets to the quality control clerk/break-down clerk for final check and sealing of the packets.

c) All packets will be sealed separately. The envelope will include, at a minimum, the DoD stamp for the MEPS, the printed label for the reception station, and the last name of the applicant. In case of multiple or similar names, more information may be added, such as a first name or initial.

29) APPLICANT AND SHIPPER TRANSPORTATION:

a) The contract hotel is responsible for applicant transportation from the MEPS to the contract hotel. The recruiter may be authorized to transport the applicant from the contract hotel to the MEPS providing all timelines are strictly met.

b) The recruiting Service is responsible for applicant transportation from the bus, or train terminal to the contract hotel or MEPS.

c) The contract hotel is responsible for applicant transportation from the airport to the MEPS (if applicant is scheduled to test), or from the airport to the contract hotel (if not required to process until the following day).

d) The MEPS is responsible for applicant transportation to and from medical consults and the airport for shipping for same day shippers. Contract hotel is responsible for shipper transportation to the airport for next day shipping.

e) Services will authorize and coordinate POV travel to duty stations for prior service applicants with the TA. Shipper travel to and from the airport by any means not listed herein is prohibited.

f) Applicants are not authorized to drive themselves to the MEPS.

30) ETP GUIDELINES:

a) When a Service liaison requests a variance to UMR 601-23, the ETP will be processed according to UMR 601-23, par. 5-16.

b) When a Service liaison requests a variance to the Portland, OR MEPS SOP, the requesting Service will complete a MEPS POR Form 69-R and submit to appropriate approving authority for action. The requestor will complete the form as follows:

1. Date and time submitted and date request is for.
2. Service requesting exception, applicant's full name and last four of SSN (inclusion of the last four of SSN is voluntary; however, failure to provide may result in misidentification of the individual).
3. Recruiter name.
4. Check all processing types (Medical, Processing, Testing) that apply to requested exception.
5. Reason for request and justification.
6. Service liaison’s printed name and signature.

c) Service liaisons will submit the ETP to the applicable supervisor for action. If Medical processing of any kind is required the Medical NCOIC (or if unavailable, the Lead Medical Technician) must approve/disapprove the ETP before it goes to any other supervisor. No processing will be allowed until the ETP is either approved or denied and the ETP must be signed by supervisors for all sections involved. Supervisors will carefully evaluate processing workload, doctors available, and personnel shortages before any exceptions will be considered. If denied, the Service liaison is able to appeal to a higher member in the MEPS Chain of Command.

d) ETPs for walk-ins:

1. Clean pre-screens are mandatory for walk-ins. Any prescreen not authorized will be immediately rejected and the applicant will be unable to floor.
2. ETPs are not accepted for additional walk-ins. Services are limited to two per day.

e) ETPs for time extensions:

1. ETPs requesting a moderate time extension (10 to 15 minutes) past the 1530 cutoff time to allow applicants to come across to Processing for Phase 2 must be submitted NLT 1515 and will only be accepted for applicants that have been frontloaded. Applicants must be frontloaded NLT 1430.
2. No ETPs for time extensions will be authorized for non-front loaded applicants; they must be at the control desk prior to 1530 in order to swear in that day.

31) PROCESSING PERSONNEL LUNCH AND BREAKS:

a) All personnel will receive a 30 minute break for lunch, as close to four hours after arrival as is practical. The Processing section has a structured lunch break log to ensure no more than two personnel are at lunch at the same time. Lunch periods are 10 minutes apart to minimize the time applicants would need to wait if we were short handed. Any extensions of a lunch break are to be requested through the Supervisor or Operations Officer. Once that extension has been granted, requesting individual will inform one of the LHRAs of the exception.

b) CDC will inform helper when they take a break to ensure proper control desk manning. LHRA will note breaks and lunches for CDCs and identify personnel to fill in as needed.

c) MEPS employee’s breaks are not to exceed 15 minutes per four hours of continuous duty; may not immediately precede or be a continuation of the lunch period; and may not be a basis for shortening the work day. As a courtesy, prior to break, employees will ensure supervisor or designated representative is informed, and that no applicant packets waiting for processing are left on their desk. All personnel will utilize the sign-out sheet on the Supervisor’s door to annotate breaks, appointments and extended periods away from their desk (such as helping another section) for accountability purposes.

32) FILES ROOM PACKET REQUESTS:
a) File room packet request will be completed throughout the day from 0800 to 1800 by the files room clerk and the CDC as necessary. All Service liaisons are responsible for correct, legible entries in the packet request log located in the files room.

b) Files room clerk will check the log on a regular basis and complete the requests as soon as feasible. Files room clerk will ensure packets are checked out to the correct Service for an extended period of time so that the packets will not show up on the overdue packet log.

c) All requests will be completed prior to close of business. When Processing is complete for the day, the request book will be closed out, highlighted and initialed.

33) LETTER READ REQUESTS:

a) Letter read requests will be accomplished IAW timelines defined in Ref. D, and by close of business IAW Ref. F. Letter read requests must be submitted before 1100 to begin the 72 hour processing cycle/window. Letter reads must be submitted at least 72 hours before applicant is projected. Services may not project applicants without an approved letter read. Approved letter read must accompany the original DD2808 and 2807 upon medical check-in.

b) Files room clerk will check the log on a regular basis and complete requests as soon as feasible, ensure there is a full physical in the record, and check the packet out to “Medical – Letter Read”, and to one of the Medical personnel. Packet will be charged out for at least three days to a week to ensure it does not show up on the overdue packet roster. Files room clerk will annotate the date the packet was pulled, and place the packet in the “Letter Read – Outgoing” rack in the files room.

c) Incoming letter reads will be charged out to the Service upon receipt. This will not only give the Services the information they requested, but will save everyone the trouble of writing the request in the files room packet request book. Check the packet out to the Service for at least two years so it will never show up on the overdue packet roster.

d) All requests will be completed prior to close of business. When Processing is complete for the day, the request book will be closed out, highlighted and initialed and placed in the files room until the following day.

e) NOTE: Packets on letter read are not eligible for processing the next day.

34) SERVICE PROCESSING FOR (SPF) CHANGES:

SPF changes will be accomplished IAW timelines defined in Ref A and C, and by close of business IAW Ref. E. All applicants flooring the next day must be SPF’d NLT 1100 48 hours prior, to allow for administrative processing with the exception of Other MEPS Processors (OMP).

SPF RESTRICTIONS:

a) No more than 1 SPF per applicant per day.

b) OMP (other MEPS processors): allow 24 - 72 hours for processing for testing data only. Allow at least five business days to process before projecting for medical records.
e) Prior military service requests will have one of the following before SPF can be completed; DD214, REDD Report (signed and dated by the Service representative), NG22 or 368.

d) SPF will not be accomplished if the packet is checked out to another Service for letter read or waiver processing. Service is responsible for requesting packet from the working Service.

e) SPF will not be accomplished if a packet is in DEP or accessed to another Service. Service is responsible for requesting DEP discharge or accession removal from owning Service.

f) SPF will not be accomplished if HIV/DAT results are pending, until packet is received from medical with results posted.

g) Requesting Service will provide a DD214 if applicant has shipped for another Service. Files room clerk will remove accession and DEP data (if any) prior to SPF. Another physical must be done in its entirety if the applicant shipped on a physical. If medical has been lost but is not over two years old, the requesting Service will provide a letter stating that the medical is irretrievable and requesting a new physical. The Applicant will be required to re-test if the test expires because of DEP/accession data being removed. Supervisory HRA/TCO/ TST will approve exceptions on a case by case.

h) Any applicant who has changed services (or MEPS) more than four times within six months must interview with Operations Officer/Commander and be granted approval prior to SPF being accomplished.

i) SPF will not be accomplished if an applicant is actively processing for another Service. A SPF request can be turned in the following day, or when HIV/DAT results have been posted and the packet is returned to the files room.

j) When processing is complete for the day, the request book will be closed out, highlighted and initialed.

35) SHIPPING LIST:

a) The TA will prepare the shipping list on the day prior to departure using the projections listed on the USMEPCOM 727PL and distribute as necessary. The Services will inform the TA of any changes, cancellations or special circumstances.

b) The TA will ensure the CDC is aware of any changes to the shipper status (i.e. ETST, cancellations, holdovers, location or name change, etc.) CDC will ensure any potential problems are brought to the immediate attention of the TA that would affect the timely processing of a shipper (i.e. overweight, problems with paperwork, etc.). If the Service attempts to contact the CDC about shipper issues, CDC will refer them to the TA.

36) END OF DAY CLOSEOUT:

a) CDC will reconcile the day’s workload by using 727PL log and USMIRS workload screen TP03 IAW Ref. A and F.

b) CDC will verify that all ETNAC submissions are correct and that no submissions are sent
unless the applicant has contracted that day.

c) CDC will ensure all applicants have been coded MEPS out (MOT) in USMIRS.

d) CDC will ensure all SPF’s, files room packet requests and letter reads are completed; the books will be date stamped for the next processing day, and initialed by the closing person. CDC/Operations Officer will ensure backup tapes have been changed.

e) On a weekly basis, TA will close out the meal check log and have the Commander or Commander’s representative (enlistment ceremony officer) sign transaction report.

37) **POINT OF CONTACT:** is the Operations Officer CPT Ash at (503) 528-1630, ext 216.

Frankie C. Cochiasue  
Major, USA  
Commanding