

Welcome to the NDU Student Profile

OMB CONTROL NUMBER: XXXX-XXXX OMB EXPIRATION DATE: XX/XX/XXXX

Please consult the invitation email you received with your USMS Username and Password to access this system.

Enter each one into their respective textbox to the left.

If you get locked out from additional login attempts, please call the **NDU ITD Service Desk** at (202) 685-3824 (M-F 6:00AM to 6:00PM Eastern Time)

If you have questions regarding the NDU Student Profile, please contact the University Registrar at your respective campus:

Ft. McNair (Washington D.C.)

Comm: (202) 685-2128

DSN: 325-2128

Email: University-Registrar@ndu.edu

JFSC (Norfolk, VA)

Comm: (757) 443-6124

DSN: 646-6124

Email: Registrar2@ndu.edu

Privacy Act Statement

Authority: 5 U.S.C 552a Privacy Act; 5 U.S.C. § 301 (Department Regulations); 10 U.S.C. §2163 (Degree Granting Authority for National Defense University); 10 U.S.C. §2165 (National Defense University: Component Institutions).

Purpose: Information is collected to complete your academic record and to meet mandatory reporting requirements.

Routine Use: Information will be disclosed within NDU for academic administrative purposes and in the aggregate for reporting purposes. Information pertaining to individuals will be disclosed only upon request of or with permission of the individual, or to NDU employees with official need-to-know. The applicable system of records notice is located at: https://dpcld.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/....

Disclosure: Voluntary; however, failure to provide the information may result in our inability to uniquely identify individual academic records.

AGENCY DISCLOSURE NOTICE

The public reporting burden for this collection of information, XXXX-XXXX, is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

https://siq.usalearning.net 1/1



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Welcome to the National Defense University (NDU) Student Profile

This form is designed to collect information that will help the University maintain your academic record and provide student services that will best enhance your learning experience.

- Please answer ALL questions to the best of your ability. Any questions that you skip MAY require follow-up from college faculty or staff. If a question does not apply to you, please select the "Not Applicable" option where available.
- Completing all required fields should take approximately 15 minutes. We ask that you complete your registration profile by the
 suspense date provided in your welcome email. Late submission of your profile will affect the completeness and accuracy of your
 student record.

If you have any questions about the NDU Student Profile, please contact your College Registrar using the contact information in the email you received, or contact the University Registrar at:

Comm: (202) 685-2128

DSN: 325-2128

Email: University-Registrar@ndu.edu

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Personal
Full name on file in USMS Please review the full name, including the middle name, we have received and recorded as part of your student record. All parts of your name should be fully and completely spelled out. For US students, your name should conform to your current legal name as it appears on your passport or social security card. For international students, your name should conform to your international travel order.
Full Name Review Please confirm your full name is correct by selecting "Yes" or correct your name by selecting "No" and providing the correct information as necessary. Please note, name changes are requested now, or during your time at NDU, we may only change your name according to how it appears on the documents mentioned above.
○ Yes
○ No
Suffix If you have a suffix please select from the below listing. Select one ▼
First Name - Phonetic
Last Name - Phonetic
Nickname If you have a preferred name or nickname, please enter it below.
Birthdate * Provide your full birth date. Year Month Day Day
Marital Status Please indicate your marital status as appropriate None V
Gender * Please select your gender. - Select - ✓
Country of Citizenship on file in the USMS This information is on file in the USMS and cannot be edited.

Country of Citizenship Validation

Please confirm your Country of Citizenship. If you select, "Not correct," you will be provided space to type in the correct Country of Citizenship. Please remember that your Country of Citizenship should be the same as your passport.

Correct

O Not Correct

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Primary/Local Street Address

Please provide the street address where the University should send all correspondence while you are enrolled. If you are attending a program on one of NDU's campuses (Ft. McNair, JFSC, or Ft. Bragg) please provide your local address. If you are attending a program in a non-resident status please provide the address you would receive official University correspondence during your enrollment.

resident status piease provide the address you would receive official Offiversity correspondence during your enrollment.
Primary/Local Street Address *
Primary/ Local City *
Primary/Local State *
Primary/ Local Zip/Postal Code *
Primary/Local Country * None
Primary Phone Number Type * Please select the appropriate option for Primary/Local Phone Type. While most correspondence will occur via email, this phone number will serve as the phon number for official NDU business and emergency notifications (e.g., base lockdown). - Select -
Primary Phone Number * Please use the format (###) ###-###.
Emergency Contact Name * Please provide the name of someone the University can contact in case of an emergency.
Emergency Contact Relationship Please select the appropriate list value as it applies to your relationship to your emergency contact identified above. - None - V
Emergency Contact Phone * Please provide a phone number for your emergency contact identified above. Please use the format (###) ###-###.
Emergency Contact Email Please provide a valid email address for your emergency contact identified above.

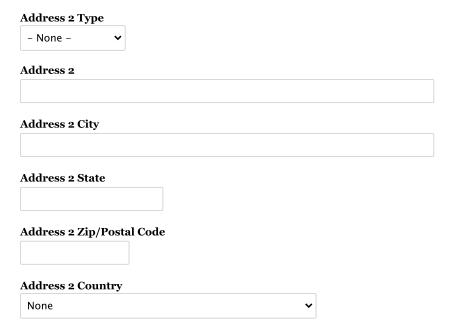




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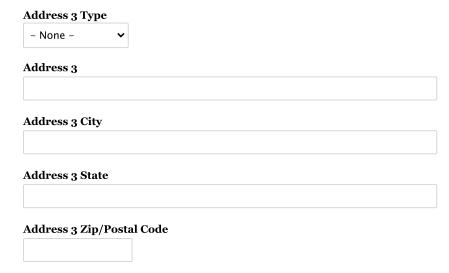
Address 2

If different from your local address, please select the Address 2 type as "Permanent" and provide your permanent address in the Address 2 fields. Otherwise please select the appropriate address type and complete the corresponding Address 2 fields.



Address 3

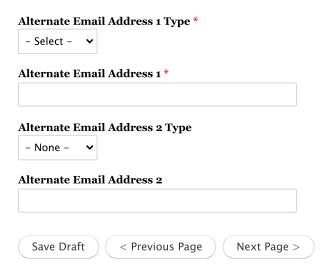
If you have an additional address where official correspondence should be sent, please provide it here or proceed to the next section. Please select the appropriate address type for the following Address 3 fields.



Address 3 Country	
None	~

Alternate Email Addresses

If you would like to provide additional email addresses for University correspondence please enter the requested email type to the corresponding email address for each one below.





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Page 5 of 14 (31%) Admissions Highest Degree Earned * Please select your highest degree earned from the list below. None Degree/Award Subject * Please provide the major, discipline or subject area of your highest degree (e.g., computer science, history, medicine). Educational Institution * Please provide the name of the institution where you received your highest degree/award. Date of Degree Conferral * Please select the year your degree was conferred (awarded). Month Month



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Ethnicity/Race	
The questions regarding ethnicity and race in this section are optional.	
Are you of Hispanic or Latino origin? Ethnicity	
Please select one or more of the following races. Race	☐ White
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Inter	national Student Experience
	provide the month and year you entered military Service. Month
	illtary Unit Current assignment icable, please provide your current military unit assignment. Otherwise, leave this question blank and go to the next question.
	assignment ou served in an assignment where you interacted with Services other than your own?
○ Yes	3
○ No	
	national assignment ou served in an assignment where you interacted with military Services from other countries?
○ Yes	3
○ No	
	national Operational Experience indicate if you have military operational experience.
○ Yes	3
○ No	
	national Command O-5 Experience indicate if you have completed an O-5 command assignment.
○ Yes	3
○ No	
Inter	national Command O-6 Experience

Please indicate if you have completed an O-6 command assignment.

○ Yes

 \bigcirc No

Recent Position 1

Please provide your most recent position title prior to coming to NDU.

Recent Agency 1

Please provide the name of the agency where you held your most recent position title.

Recent Position 2

Please provide your position title prior to your last position.		
Recent Agency 2 Please indicate the agency where you held that position.		
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Organization type

- U.S. Department of Defense Agencies
- $\bigcirc\,$ Non- U.S. Department of Defense Federal Agencies
- O State Government
- O Private Sector



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U.S. Civilian Student Experience

Please answer the following questions if you are enrolled at NDU as a U.S. Civilian student.

Reserve/Guard Service

Are you currently also a member of any of the U.S. Reserve or National Guard Services?



U.S. Veteran

Are you a veteran of the U.S. Armed Forces or any of the U.S. Reserve Components?







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U.S. Military Professional Education

In addition to your academic educational background, please provide information on your prior Professional Military Education (including Joint Professional Military Education) experience(s). The following questions ask you to provide NDU with information regarding your Intermediate Level Education (ILE) and/or Senior Level Education (SLE).

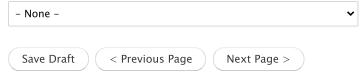
Intermediate Level Education Programs and Institutions

Please select the appropriate name of the ILE program you completed. If you do not see a program/institution listed please select the "Other" option and provide the name of the program in the available field. If the question is not applicable to you please select the "Not Applicable" option.



Senior Level Education Programs and Institutions

Please select the appropriate name of the Senior Level Education (SLE) program you completed. If you do not see a program/institution listed please select the "Other" option and provide the name of the program in the available field. If the question is not applicable to you please select the "Not Applicable" option.







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U.S. Military Experience

Please answer the below questions if you are currently active duty U.S. Military, U.S. Military Reservist, or have prior U.S. Military Service experience.

U.S. Military Service: Grade

Please provide your current grade or grade at the time of separation if you are a veteran.



Basic Active Service Date

If you are active duty military, a reservist, a member of the National Guard, or you have prior U.S. Military Service, please provide the month and year you began your service.

Month	~	

Military Unit Current Assignment

If applicable, please indicate the name of the current command you are assigned to. If this question is not applicable to you then type "Not Applicable" in the text box.

Joint Billet Experience

Please indicate if you have served in a joint assignment.

\bigcirc	Yes
\sim	

○ No

Joint Qualified Officer

Please indicate if you have completed the Level III requirements under the Joint Qualification System or equivalent and have been designated a Joint Qualified Officer.

\bigcirc	Yes

○ No

Operational Experience

Please indicate if you have military operational experience.

O No

Special Operational Experience

Please indicate if you have military special operations experience.

\bigcirc	Yes

O No

Command O-5 Experience

Please indicate if you have completed an O-5 command assignment.

○ Yes

O No

Command	0-6	Ex	perien	ce
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Please indicate if you have completed an O-6 command assignment.

○ Yes

○ No

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MOS Designators/Specialty Codes

Army Primary MOS Code

Select your primary Army MOS code. If this is the incorrect branch of service contact the University Registrar. If your specialty code is not listed please select the "_Not Available_" list value at the bottom of the list AND indicate on the last question on this page that your specialty code or designator is not listed.

None ·

Army Secondary MOS Code

Select your secondary Army MOS code, if applicable. If this is the incorrect branch of service contact the University Registrar. If your specialty code is not listed please select the "_Not Available_" list value at the bottom of the list AND indicate on the last question on this page that your specialty code or designator is not listed.

None

Not listed

If you selected "_Not Available_" for either Primary MOS Designator/Specialty Code or Secondary MOS Designator/Specialty Code please check the appropriate box below. You will be asked to write in your designator/specialty code for inclusion in the list. You may select one or both options as it applies to you.

- Primary MOS Designator/Specialty Code is not available
- ☐ Secondary MOS Designator/Specialty Code is not available

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To submit your Student Information Questionnaire, please click the "submit welcome questionnaire button" below.

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Thank you, your submission has been received.

Go back to the form