

**MARSOC SPECIAL OPERATIONS TRAINING**  
**COURSE (STC) COMMAND**  
**PRE-SCREENING CHECKLIST**

NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_ SSN: \_\_\_\_/\_\_\_\_/\_\_\_\_\_

UNIT: \_\_\_\_\_

In order to preclude students from being denied enrollment upon arrival, it is necessary that parent commands ensure their Marines/Students satisfy course prerequisites in this checklist.

<u>Prerequisite</u>	<u>Yes/No</u>	<u>Remarks</u>
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1. Student must have passed a PFT within (30) days of course convening date.	____/____	Date: _____ Signature: _____
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Pull-Up/Flex Arm Hang: _____		
Crunches: _____ Run Time: _____	____/____	Date: _____
Score: _____ Date: _____		Signature: _____

2. Student must meet USMC height and weight standards within (30) days of course convening date.		
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Height: _____ Weight: _____	____/____	Date: _____
Body Fat: _____ % Date: _____		Signature: _____

3. Student must be in a full duty status. Medically qualified to participate in all facets of the training. Refer to the MARSOC STC/SERE Medical Screening Checklist.	____/____	Date: _____ Medical Officer/IDC Signature: _____
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**\*\* A Medical Officer or qualified Independent Duty Corpsman must screen, please stamp or print credentials clearly. \*\***

4. Possesses uniforms, gear/equipment for the course. Refer to Required/recommended Student Gear/equipment List.	____/____	Date: _____ Signature: _____
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9/8/2014

5. Ensure student has their Medical/  
Dental record, Orders, Command Pre  
-Screening Checklist completed and  
signed and STC/SERE Medical  
screening form completed and signed  
in hand upon arrival for the course.      \_\_\_/\_\_\_ Date: \_\_\_\_\_  
Signature: \_\_\_\_\_

6. Students (Sgt & below) must have a  
To TAD - "TD" Fitness Report  
completed.      \_\_\_/\_\_\_ Date: \_\_\_\_\_  
Signature: \_\_\_\_\_

7. Students (CPl & below) must have  
current Pro & Con marks.      \_\_\_/\_\_\_ Date: \_\_\_\_\_  
Signature: \_\_\_\_\_

Sergeant Major or Senior Enlisted  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Commanding Officer or Officer in Charge  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_