

U.S. COAST GUARD AUXILIARY **ENROLLMENT APPLICATION INSTRUCTIONS**

1. **GENERAL:** Everyone requesting membership in the U.S. Coast Guard Auxiliary must complete this form.
 - a. Read all instructions carefully (Enclosure 1).
 - b. Read the Privacy Act Statement on page 1 of the Enrollment Application.
 - c. This form is used to supply new member (and re-enrollee) personal information for entry into the Auxiliary database (AUXDATA II) for enrollment purposes.
 - d. Data from this form is reported in detail (with the exceptions of Date of Birth and Social Security Administration Number) on the Flotilla Roster, Member Summary and Status Report among others.
 - e. **Use black or blue ink only. No e-signatures are authorized.**
 - f. All dates should be entered using the *MM/DD/YYYY* numeric format (e.g., 06/02/1968).
 - g. Do not e-mail a completed application unless it is password protected.

2. **FLOTILLA NUMBER:** Completed by Flotilla Commander (FC) or Flotilla Human Resources (FSO-HR) officer. Enter the 7-digit District, Division, and Flotilla number of the unit submitting this application (e.g., 053-25-07) in the block in the upper right corner next to the form name.

3. **SECTION I – APPLICANT’S INFORMATION:** (To be completed by the applicant.)
 - a. **FIRST NAME, MIDDLE NAME, LAST NAME, and SUFFIX.** Enter full legal name as shown on a government issued ID (no nicknames).
 - b. **PREVIOUS NAMES USED.** Use this block to list other names used that are different from what is listed in the previous block. (i.e., aliases, maiden name, married name, legal name changes, etc.)
 - c. **OCCUPATION.** Click in the box and select the appropriate occupation code. If applicable, please select up to three acceptable 6-Digit codes from the pop up list. Place your main/current occupation in the first box, this will be the one entered into the database. For “Retired”, enter “99-0000”.
 - d. **CITIZENSHIP STATUS.** Valid proof of identity per Section V, *Verification of Citizenship Status*, must be provided and will be photocopied.
 - Citizenship Status must be verified via Section V, *Verification of Citizenship Status*, of this form, must be completed by an Auxiliary Citizenship Verifier, Finger Print Technician or by Law Enforcement Official who has viewed the original document(s) that is provided as proof of citizenship. A Law Enforcement (LE) Official (e.g., policeman, state trooper, Coast Guard member qualified in maritime law enforcement (MLE) like a Boarding Officer or Boarding Team Member) may verify applicant’s citizenship. If an LE official performs this requirement, they must provide their name, their agency name and agency ID number, sign in ink and date.
 - The document referenced for proof of citizenship must be presented for viewing, and a photocopy of that original document must accompany this application when submitted to the DIRAUX office. Photocopy **ONLY** the first two (2) pages (personal photo and information pages) of a passport. Photocopy both sides of a passport ID card.
 - Please select one of the following:

- i. Are you a citizen of the United States? Check the box if yes, otherwise keep blank. A U.S. citizen is someone that was born in the U.S. (native borne), borne abroad to U.S. parents, or naturalized. If yes, you must possess the appropriate documentation per Section V, *Verification of Citizenship Status*.

- e. NASBLA APPROVED BOATING SAFETY COURSE. Have you taken a National Association of State Boating Law Administrators (NASBLA) approved boating safety course? Check: Yes or No. If yes, you must provide the certificate card to be visually sighted and validated for entry into AUXDATA II. If no, it is recommended that you take a course as soon as possible.
 - Link to boating safety courses: [Boating Safety Courses \(uscgboating.org\)](http://uscgboating.org)
- f. EDUCATION LEVEL. Enter: GED/Alt. Credential for General Education Diploma or Alternate Credential, High School for High School Diploma, Associates for Associate level college degree, Bachelor's for Bachelor level college degree, Masters for Master level college degree, Doctorate for Doctorate level college degree, Currently in HS if still in High School, Other for other type of degree or diploma, or Professional Certificate for Professional Certificate.
- g. SPOUSE NAME. Use spouse's legal name - no nicknames (Enter N/A if not applicable).
- h. PLACE OF BIRTH: Enter city, state/province, and country of birth. Use the official two-letter postal code for state/province. (i.e., MA for Massachusetts, MD for Maryland, TX for Texas, BC for British Columbia etc.)
- i. DATE OF BIRTH. Enter date of birth using MM/DD/YYYY numeric format. Membership eligibility begins at 17 years of age unless you are a member of the Boy Scouts of America (BSA) Sea Scouts in which case eligibility begins at 14 years of age.
- j. SOCIAL SECURITY NUMBER. Enter your Social Security Administration Number. A valid nine (09) digit SSN is required to join the CG Auxiliary; the original Social Security card or an official replacement card must be provided and viewed. The SSN should be written in the following format: 123-45-6789. (A card that includes any of the following restrictive wording is **NOT** an acceptable Social Security card: NOT VALID FOR EMPLOYMENT; VALID FOR WORK ONLY WITH INS AUTHORIZATION; or VALID FOR WORK ONLY WITH DHS AUTHORIZATION) If you do not have your Social Security Card, please visit the [Social Security Administration website to order a new one](#). [Replace Social Security Card|SSA](#).
- k. SEX: Please enter Male or Female.
- l. ETHNICITY. Enter: American Indian, Alaskan Native, Hispanic American, White or Caucasian, Black or African American, Asian American, Pacific Islander, Other, or No Answer.

- m. EMAIL (Secondary). Enter secondary email address if applicable.
- n. MOBILE/HOME/BUSINESS PHONE and FAX NUMBER. Enter area code and telephone number(s) or N/A as applicable.
- o. MAILING ADDRESS. Enter current mailing address.
- i. Number and Street, or Post Office Box number. Enter house/apartment building number, apartment number if applicable, and name of street.
 - ii. City. Enter name of city where address is located.
 - iii. State/Province. Use the official two-letter postal code.
 - iv. Zip Postal Code. Enter the 5-digit ZIP code, [ZIP Code™ Lookup | USPS](#).
 - v. Country. Enter the country the address is located.
- p. RESIDENTIAL ADDRESS. Enter residential address if different than mailing address.
- i. Number and Street. Enter house/apartment building number, apartment number (if applicable), and name of street. If your residential address is the same as your mailing address, please write, "Same as Mailing Address".
 - ii. City. Enter name of city where address is located.
 - iii. State/Province. Use the official two-letter postal code.
 - iv. Zip Postal Code. Enter the 5-digit ZIP code, [ZIP Code™ Lookup | USPS](#).
 - v. Country. Enter the country the address is located.
- q. EMERGENCY CONTACT INFORMATION. Enter name, emergency contact's relationship, address, and phone numbers with area codes. This should be someone not living with you. This is needed in case there is an evacuation in your area and you and the person(s) you may be residing with needs to evacuate and the local Coast Guard or Coast Guard Auxiliary cannot get in touch with you.
- r. MILITARY SERVICE. Check: Yes or No if you are serving or have previously served in the military. If yes, fill in the table. Veterans/retirees must provide a copy of each valid M- 214 (copy 2), Certificate of Release or Discharge from Active Duty, or [equivalent \(or other type of discharge paperwork\)](#) as part of this enrollment package. The interviewer must visually sight the applicant's military ID card if currently serving on active duty or in the Reserves (A copy of the ID does not need to be provided). Enter each separation/discharge date if more than one. Some possible options for requesting a DD-214 or other discharge paperwork: [Request Your Military Service Records \(including DD214\) | Veterans Affairs \(va.gov\)](#); [Request Military Service Records | National Archives](#); [DD Form 214 / DD214 / DD 214 Discharge Papers and Separation Documents | National Archives](#); <https://www.archives.gov/veterans/military-service-records/standard-form-180.html>; or [Requesting Military Records Including DD Form-214 MI- U.S. Department of Defense > Article](#).
- i. Branch. Enter the service branch abbreviation: USCG for Coast Guard, USA for Army, USAF for Air Force, USN for Navy, USSF for Space Force, USMC for Marine Corps, ANG for Air Force National Guard, or NG for Army National Guard.
 - ii. Status. Enter: Active, Reserve, Veteran, Retired, or Prior Military Service.
(**Veteran:** During Peacetime - To be considered a veteran, any military personnel must be on active-duty service for at least 180 days. The only exception is if the member sustained a service-related injury and was discharged under honorable conditions. During Wartime - To be considered a veteran, any military personnel must be on active-duty service for at least 90 days. The exceptions are if the

member sustained a service-related injury and was discharged under honorable conditions. During Wartime - To be considered a veteran, any military personnel must be on active-duty service for at least 90 days. The exceptions are if the member sustained a service-related disability or received the Purple Heart and was discharged under honorable conditions. For both peace and wartime, however, any military personnel who died during service are considered a veteran.)

- iii. Pay Grade. Enter current pay grade if still active or reserve or highest pay grade listed on DD-214 if a veteran or retired. (i.e., O-5 for Commander or Lieutenant Colonel; E-5 for Petty Officer Second Class, Sergeant, or Staff Sergeant; etc.)
- iv. Separation Date. Enter each separation/discharge date if more than one.
- v. Character of Service. Enter the type of separation/discharge received from the M-214 or equivalent. (i.e., Honorable, Dishonorable, Other than honorable, etc.).
- vi. Separation Code. Enter your separation/discharge code from the DD-214 or equivalent.
- vii. Re-entry / Re-enlistment code. Enter your re-entry/re-enlistment code from the M-214 or equivalent.
- viii. If Re-entry / Re-enlistment Code is RE-3 or RE-4, then on a separate sheet of paper, please provide an explanation of why you received either of those codes.
- s. PRIOR USCG AUXILIARY. Check Yes or No if you were previously a member of the Auxiliary.
 - i. Initial Enrollment Date (month and year if exact date is unknown). Enter previous enrollment Date.
 - ii. Member ID. Enter previous member ID number.
 - iii. Disenrollment Date (month and year if exact date is unknown). Enter previous disenrollment date.
 - iv. Reason for Disenrollment. Why you disenrolled or why you were disenrolled
 - v. District. Select the District/Region you were in.
 - vi. Division and Flotilla Number. Enter the Division and Flotilla Number you were in.
 - vii. Was your membership terminated for cause or for any disciplinary reasons? Check: Yes or No. If yes, please provide details on separate sheet of paper.
- t. WHO IS RESPONSIBLE FOR RECRUITING YOU INTO THE AUXILIARY? Enter the name of the main person who is responsible for recruiting you into the Auxiliary and that person's Division and Flotilla number.
- u. ARE YOU A MEMBER OF THE BOY SCOUTS OF AMERICA SEA SCOUTS? Check: Yes or No. If yes, must provide for visual sighting either a Sea Scout membership card or Sea Scout membership application form if a Sea Scout ID card has not yet been issued. If yes, are you at least 14 years of age and not yet 17 years of age? Enter: Yes or No.
- v. DO YOU INTEND TO BE A MEMBER OF THE AUXILIARY UNIVERSITY PROGRAM (AUP)? Check: Yes or No.

4 SECTION II – BACKGROUND CHECK. (To be completed by the applicant.)

- a. ANY ARRESTS/CHARGES/CONVICTIONS/OTHER ISSUES. Check: Yes or No (Note: You may exclude minor traffic violations unless drugs, alcohol, or injury were involved.). If you checked “Yes”, then on a separate sheet of paper, please list all arrests, charges, and/or convictions regardless of age or place of incident (nationally or internationally), and whether the record in your case has been sealed, expunged, or otherwise stricken from court records. You must include all military courts-martial or

non-judicial punishment (Article 15, UCMJ, or Captain's Mast). You must also include detailed information about any other issues that may affect suitability of membership, such as (but not limited to): any past or present issues such as, restraining orders, warrants, parole, probation, etc.; any civil action alleging wrongful death, assault, battery, or child custody/support issues; any involuntary confinement for psychiatric evaluation or confinement as a voluntary or involuntary patient for the treatment of mental illness or substance abuse; any adjudication of mental illness or dangerous mental illness and in need of involuntary care and treatment in a facility treating persons suffering from mental illness; or other important areas of functioning; or any adverse financial issues such as failing to pay taxes, failing to meet financial obligations, failing to pay child or spouse support (if ordered), etc. Please provide a statement of specifics about each incident and include it with the list. The statement must include date, location (city, county, state, country) of incident, the disposition, and any additional facts including mitigating circumstances, along with copies of the accusatory instrument(s) and court documents reflecting the disposition. **Failure to provide all required information may result in your membership application being denied or your subsequent disenrollment if any issues are discovered after enrollment. (Please note: Some State legal systems may claim that a criminal record is expunged, however all arrests and convictions are identified in any federal background check so ensure all arrests and convictions are noted even though a State legal system claims the record was expunged.)**

- b. Place your initials to show that you understand what you need to provide and that you have provided all requested information.
- c. Place your initials to show that you understand that if you are accepted as member of the Auxiliary, you will self-report any arrests, charges, convictions, and/or other issues to your Chain of Leadership and Management (COLM) as soon as possible and will be subject to disciplinary action for failing to do so, if deemed appropriate.

5. SECTION III - PARENT(S)/GUARDIAN(S) NAME(S) AND SIGNATURE(S)
(Required for Applicants under 18 years of age). (To be completed by the applicant's parent(s) / guardian(s).)

- This is only required if the applicant is under 18 years of age. If the applicant's parents are separated or divorced, both parents must sign, unless there is a custody agreement and/or court order that states otherwise. If there is, then the parent/guardian signing must provide a copy for visual sighting.

6. SECTION IV - APPLICANT CONSENT/STATEMENT/PLEDGE AND SIGNATURE.
(To be completed by the applicant.)

- a. By signing this, the applicant:
Permits the U.S. Coast Guard to use applicant's full legal name, Social Security Number, date of birth, and any other information for identification purposes and to obtain background information from any person, entity, corporation, or government agency (local, state, or federal) to be used to determine initial membership eligibility, and consent for the same information to be used for annual background checks to determine sustained suitability for service.

Acknowledges that agreement to undergo the requisite background check is not a guarantee of membership. An unfavorable background check determination may result in denial of their application or subsequent disenrollment from the U.S. Coast Guard Auxiliary despite any training, duties, activities that they may have performed as well as any personal investments in time, effort, and resources that they may have expended in their association with the Auxiliary;

Affirms under penalty of perjury that all statements contained in their application for membership in the U.S. Coast Guard Auxiliary are true and complete, and they authorize verification of their statements for the official use of the U.S. Coast Guard and U.S. Coast Guard Auxiliary. They understand that ANY false statement, failure to disclose, or shortfall in provision of information contained herein is grounds for immediate denial of their application or immediate disenrollment from the U.S. Coast Guard Auxiliary;

Acknowledges they have read the information provided to them about the [Coast Guard Auxiliary Association, Inc.](#) and understand its relationship to the U.S. Coast Guard Auxiliary. They further understand that in order to be a member of the Coast Guard Auxiliary they must also be a member of the [Coast Guard Auxiliary Association, Inc.](#) They hereby consent to membership in the [Coast Guard Auxiliary Association, Inc.](#); (See Addendum in this Enclosure for more information about the Auxiliary Association.) and,

Pledges to support the U.S. Coast Guard Auxiliary and its purposes, and to abide by the governing policies established by the Commandant of the U.S. Coast Guard.

- b. Before signing, double check accuracy of information provided throughout the entire form.
- c. **Sign and date with black or blue ink only.**

7. SECTION V – VERIFICATION OF CITIZENSHIP STATUS.

- a. The top portion (Part A) must be filled out by the applicant.
- b. Only an Auxiliary Citizenship Verifier (CV), Fingerprint Technician (FT) or a Law Enforcement (LE) Officer (Federal, State, or local) (including a CG qualified Boarding Team Member (BTM) or Boarding Officer (BO)) must verify the top portion (Part A) and check off the applicable viewed documents on the bottom section (Part B) and sign and date in appropriate block.
- c. U.S. Citizens must provide one (1) document from List A; or one (1) document from List B and one (1) document from List C.
- d. All applicants must provide a valid Social Security Card and must provide original documents for visual verification.
- e. Indicate which document (s) you are providing by checking appropriate boxes.
- f. Photocopies of the provided documents, (except Social Security Card) must be submitted with the enrollment package to the District Director of Auxiliary (DIRAUX), see Section IV.
- g. Expired U.S. Passports are acceptable however it must be accompanied by a current valid Federal or State Photo ID.

8. SECTION VI – FLOTILLA CERTIFICATION AND ATTACHMENTS. (To be completed by Flotilla Representative/Interviewer.)

- Check each block as you go through the package and interview the applicant.
 - i. Application Type. New Enrollment or Re-enrollment. If this is a re-enrollment, please note the District the person was in, the month and year the person was disenrolled, and

the person's previous member ID number. Please also note if the person received a background check waiver from a DIRAUX and note which office and if the person was disenrolled due to a discipline issue (Please ensure the statement by applicant as to what happened, is attached).

- ii. Note if the applicant is a current member of the Boy Scouts of America Sea Scouts and visually sight their Sea Scout membership card.
- iii. Note the date and score of the new member exam. The exam must be administered to all applicants and all applicants must answer the questions on their own. If there is any reason to suspect the applicant had any assistance in identifying correct answers, then the interviewer shall ensure a proctored exam is administered.
- iv. Ensure the applicant has read the Privacy Act statement.
 - v. Visually sight the boating safety course certificate and note its date and where it was issued. Note: Only National Association of State Boating Law Administration (NASBLA) approved boating safety course certificates are acceptable. Link to NASBLA approved boating safety courses across the United States: [Take a Boating Safety Course - NASBLA](#)
- vi. Review citizenship documentation and attach copies.
 - a) Ensure Verification of Citizenship is completed.
- vii. Review DD-214 (or equivalent) for discharge type and re-enlistment code and attach copies.
- viii. Ensure the Arrest/Charges/Convictions/Other Issues section is initialed in both required places.
 - ix. Ensure the consent to initial and annual federal background checks is signed and dated.
 - x. Statement of specifics and associated court document for disclosed arrests and convictions is provided, if applicable.
 - xi. Verify if the new member will need a DI (Tier 1) or a DO (Tier 3) background investigation as soon as possible (e.g., a new member who has joined to participate in the Auxiliary Cyber program) and ask if they currently have or have held a security clearance within the last two years.

9. SECTION VII – APPLICANT INTERVIEW RECORD. (To be completed by Flotilla Representative/Interviewer.)

- a. This section is used as a check off sheet to make certain the applicant has been informed of the membership opportunities and obligations in the U.S. Coast Guard Auxiliary.
- b. The interviewer must explain to the applicant what the Coast Guard Auxiliary is about, what to expect while being a member, what's expected of them while a member, training opportunities that are available, monetary costs of being an Auxiliarist, what the [Coast Guard Mutual Assistance \(CGMA\)](#) is about, and what the [Coast Guard Auxiliary Association, Inc](#) is about. Make sure they have read the information that's provide regarding the [Coast Guard Auxiliary Association, Inc](#) (See Addendum in this Enclosure for more information about the Auxiliary Association.). Check off each item as you discuss them. Once completed, both the interviewer and applicant must sign and date this section.
- c. Detailed instructions for AUXDATA II are available on the "Member How To" page found at the AUXDATA II site at [AUXDATA II \(uscgaux.info\)](#). Access to AUXDATA II should be expected to be granted approximately 45 days after enrollment.

- d. The Flotilla Representative/Interviewer must sign and date acknowledging that they have discussed and/or checked the items in Sections VI and VII. The applicant must also sign and date acknowledging that they understand the items that were discussed and/or checked in Sections VI and VII. **All signatures must be in black or blue ink only.**

10. SECTION VIII - FLOTILLA COMMANDER'S (FC) ENDORSEMENT. The cognizant FC or higher must sign and date this section if they favorably endorse the perspective member.

11. SECTION IX – DISTRICT DIRECTOR OF AUXILIARY (DIRAUX)

ENDORSEMENT. (To be completed by the DIRAUX/DIRAUX Office) (To be completed only after results of the Operational Support (OS) background check have been obtained and determined to be either Favorable or subject to DIRAUX waiver)

- Check whether the applicant is approved or disapprove. Enter member ID number, check the box for Initial Enrollment or Re-enrollment, date of enrollment action (MM/DD/YYYY) then sign and date (MM/DD/YYYY).
- Check box if a waiver or letter of caution is being granted by DIRAUX for anything noted in OS PSI background check.
- Check box if applicant was not accepted. Then explain in detail on a separate sheet of paper and attach to the file.

Addendum to Enclosure 1, **Coast Guard Auxiliary Association, Inc. Membership**

The Coast Guard Auxiliary Association Inc., (Auxiliary Association) its Board of Directors and the leadership of the U.S. Coast Guard Auxiliary (Auxiliary), thank you for volunteering to join the Auxiliary and assist in supporting the vital missions of the U.S. Coast Guard.

The Auxiliary Association is a nonprofit 501(C)(3) corporation. It was established under the laws of the District of Columbia in 1957. The Auxiliary Association manages all fiscal matters and fundraising efforts and support of Auxiliary activities not funded by the U.S. Coast Guard.

General information about the Association:

1. Membership in Auxiliary Association is a requirement to be a member of the Auxiliary.
2. Auxiliarists do not pay any dues or fees for membership in the Auxiliary Association.
3. The Auxiliary Association enters into agreement with many organizations to provide discounted services for interested members. This provides members with the opportunity to obtain services and products that may benefit the member, and which also benefit the Auxiliary financially. Whether you participate in these offers is strictly your choice. The services and products may be found on the Auxiliary Association section of the Auxiliary national website (www.cgauxa.org).
4. The Auxiliary Association provides a revenue that is vital to the overall activities of the Auxiliary. The Auxiliary Association is the vehicle for all national, regional, or broad fundraising initiatives that may benefit the Auxiliary, its units, and its programs. The Auxiliary Association resources may be augmented through revenues, grants, gifts, and donations from outside sources, both public and private
5. In addition to managing the revenue from outside sources, the Auxiliary Association manages the “national” portion of annual Auxiliary dues that members pay to their local Flotilla. Details of Auxiliary dues structure are contained in unit Standing Rules.
6. The Auxiliary Association operates the Auxiliary Center (AUXCEN) from its office in Granite City, IL. The AUXCEN stocks Auxiliary flags, pennants, burgees, certain uniform accessories, and public education materials. These items are available for sale through district material centers at conferences, by direct mail, and via the Auxiliary Association website (www.cgauxa.org).
7. The Auxiliary Association is governed by its Board of Directors and operates under the Articles of Incorporation and Bylaws. The corporate documents, public financial filings, and other Auxiliary Association information may be found in the Auxiliary Association’s website (www.cgauxa.org), follow the (About us) link
8. Additional information concerning the Auxiliary Association is contained in the Coast Guard Auxiliary Manual COMDTINST M 16790 (series), generally in Chapter 5 in the section on Solicitations, Gifts, and Donations as well as in the section on Incorporation.