



ADVANCED INFANTRY TRAINING BATTALION - COMMAND SCREENING CHECKLIST COMBAT HUNTER TRAINER COURSE/INTERMEDIATE COMBAT HUNTER COURSE



EAS:				DATE:	
NAME:	GRADE:	EDIPI:	UNIT: (BN/CO/PLT/BILLET)		

PROSPECTIVE STUDENTS MUST MEET THE FOLLOWING:		CERTIFY (INT)		
COMPANY OR EQUIVALENT	NO EXISTING FAMILY, LEGAL, HARDSHIPS THAT WILL PREVENT FULL COURSE PARTICIPATION.		COMPANY 1STSGT RANK/NAME:	
	REGISTERED OR STANDBY IN MCTIMS?			
	POSESSES APPROPRIATE UNIFORMS AND GEAR FOR THE COURSE. (AS PER GEAR LIST)		SIGNATURE:	CERTIFICATION DATE:
	A LCPL MAY ATTEND THE CHTC COURSE WITH AN APPROPRIATE PAGE 11 ENTRY STATING THAT HE/SHE IS SERVING IN A LEADERSHIP ROLE.			
S1 OR EQUIVALENT	TAD ORDERS IN HAND.		S-1 REPRESENTATIVE RANK/NAME:	
	ONE YEAR OF SERVICE REMAINING OR ONE DEPLOYMENT REMAINING IN SERVICE.		SIGNATURE:	CERTIFICATION DATE:
MEDICAL	FULL DUTY STATUS WITH NO EXISTING MEDICAL OR DENTAL PROBLEMS AND HAS CURRENT PHYSICAL HEALTH ASSESSMENT - MEDICAL CRITERIA COMPLETE AND SIGNED BY AN IDC OR MEDICAL OFFICER. STUDENT HAS NO APPOINTMENTS SCHEDULED THAT WILL INTERFERE WITH COURSE.		MEDICAL OFFICER/IDC RANK/NAME:	
			SIGNATURE:	CERTIFICATION DATE:
S3 OR EQUIVALENT	FOR CHTC ONLY (NOT A REQUIREMENT FOR ICHC): COMPLETE THE FOLLOWING MARINE NET COURSE UT03A00000 UTM (PLATOON LEVEL) FOR CHTC. UPON ARRIVAL TO THE COURSE MARINE MUST SHOW MARINET CERTIFICATE OF COMPLETION.		S-3 REPRESENTATIVE RANK/NAME:	
			SIGNATURE:	CERTIFICATION DATE:

COMBAT HUNTER TRAINER COURSE / INTERMEDIATE COMBAT HUNTER COURSE

FAMILIAR WITH THE FOLLOWING SUBJECTS:

- Tactical Combat Casualty Care
- Perform Individual actions in a Fire Team
- Conduct Land Navigation
- Squad Level Patrolling
- Communicate Using Hand and Arm Signals
- METT-T
- Prepare For Combat
- Public Speaking and Presenting

I HAVE PERSONALLY SCREENED THIS MARINE AND CERTIFY THAT THE MARINE MEETS ALL REQUIREMENTS FOR ENROLLMENT AS A STUDENT AT THE COMBAT HUNTER TRAINER COURSE / INTERMEDIATE COMBAT HUNTER COURSE AS OUTLINED ABOVE.

PRINT NAME: _____	SIGNATURE: _____	CONTACT # _____	DATE: _____
(Company First Sergeant)			
PRINT NAME: _____	SIGNATURE: _____	CONTACT # _____	DATE: _____
(Company Commander)			

All students traveling more than 50 miles report to AITB Building 64436 no later than 2000 on the report date, the day prior to the convene date. All students traveling less than 50 miles report to AITB Building 64436 no later than 0700 on the convene date. All students are required to possess their original orders, medical screening checklist and completed Command Screening Checklist. Leadership role page 11 as applies. Uniform for check-in is the MARPAT green uniform.