

****ATTENTION****

**MARADMIN 280/24 was signed and released on 17 June 2024
and introduces interim guidance on the implementation of the SkillBridge Program.**

Several significant changes will go into effect on 31 August 2024.

***SkillBridge participation packages approved prior to the effective date shall be governed by the
current policy, NAVMC 1700.2.***

Important updates include:

- **Timeline/Duration**
 - The three-category system prescribes the maximum number of days Marines may participate in SkillBridge prior to their separation/retirement/end of active service (EAS).
 - Category I, E1-E5: Up to 120 days of SkillBridge participation
 - Category II, E6-E7, WO-CWO3, and O1-O4: Up to 90 days of SkillBridge participation
 - Category III, E8-E9, CWO4-CWO5, O5 and above: Up to 90 days
- **Leave and Permissive Temporary Additional Duty (PTAD)**
 - PTAD or leave in conjunction with SkillBridge is authorized. However, the combined period of absence from duties must fall within the three-category timeline/duration limits.
 - Industry partners do not have the authority to grant Marines absences that fall within leave or out of bounds parameters. Marine Commanders retain that authority, and such requests must be routed via the chain of command, which requires the appropriate change in absence status i.e., leave vice PTAD.
- **Approvals and Authority**
 - Categories I and II - Commanders at the grade of Lieutenant Colonel and above
 - Category III - General Officers
 - Category III participation cannot result in a gapped billet
 - Marines serving within joint organizations/commands are required to obtain an O6 level endorsement from their operational chain of command as a supplement to the application requirements. Final approval authority for all joint Marine applicants is their appropriate (based on category) administrative Marine Commander.
- Marines navigating the Integrated Disability Evaluation System (IDES) remain eligible for SkillBridge participation under the special considerations section of NAVMC 1700.2.

It is strongly encouraged that Marines interested in participating in SkillBridge review the entirety of MARADMIN 280/24 before submitting their application package.

Please contact your local MCCS Education Center or Transition Readiness Program office for any questions or concerns. You can also email skillbridge@okinawa.usmc-mccs.org.

DoD SKILLBRIDGE PROGRAM

APPLICATION PACKET

Thank you for your interest in the DoD SkillBridge Program.

References:

- DoDI 1322.29
- NAVMC 1700.2
- OASD Memorandum, Subject: USE OF UNACCOMPANIED BARRACKS AND OTHER SIMILARLY UTILIZED LODGING FACILITIES IN SUPPORT OF SKILLBRIDGE (CAREER SKILLS PROGRAM)

Overview:

The DoD SkillBridge Program provides Service Members an opportunity to gain valuable civilian work experience through specific industry training, apprenticeships, or internships within their last 180 days of active duty service.

Eligibility:

To participate in the Marine Corps SkillBridge (Employment Training Program) Marines must:

- Complete at least 180 days on active duty and be discharged from active duty with an honorable discharge, including general discharge (under honorable conditions), within 180 days of the date of commencement of participation in such program.
- Be separating or retiring from the Marine Corps and have sufficient time remaining on their contract to complete the program prior to the established separation date.
- Have attended and completed the requirements of the Transition Readiness Seminar 180 days prior to separation.
- Have reviewed the SkillBridge Participants Ethics Brief and filled out the SkillBridge Ethics Brief Completion Page found here: <https://www.okinawa.usmc-mccs.org/skillbridge>.
- Receive command approval prior to attending a Marine Corps SkillBridge program.

Resources:

To research current DoD-approved SkillBridge programs, locations, and for more information, visit the Department of Defense SkillBridge website at: <https://skillbridge.osd.mil/>.

For assistance researching programs and preparing your SkillBridge application package, visit your nearest MCCS Education Center or Transition Readiness Program (TRP) office. For an overview of the process, forms required for the SkillBridge application, as well as links to the DoD SkillBridge website and other frequently used SkillBridge opportunities, visit the MCCS Okinawa DoD SkillBridge website at: <https://www.okinawa.usmc-mccs.org/skillbridge>.

We are also available by email at: skillbridge@okinawa.usmc-mccs.org.

NOTE: If you are interested in the MSTEP or UAVIP SkillBridge program at Camp Pendleton, we can help you connect with their MCCS staff as the application process may be different.

DoD SKILLBRIDGE Step-by-Step Guide

1. **Determine Eligibility** (See “Eligibility” on first page)
2. **Talk to your command about their support of your participation in a SkillBridge opportunity.**
3. **Talk to IPAC Outbound about the check-out and separation process with SkillBridge.**
4. **Research and identify a DoD-approved SkillBridge opportunity.**
 - a. To research current DoD-approved SkillBridge programs, locations, and for more information, visit the Department of Defense SkillBridge website at: <https://skillbridge.osd.mil/>.
5. **Contact the DoD-approved company or organization to inquire about the potential SkillBridge opportunity.**
 - a. Reach out directly to the company or organization to determine if the opportunity aligns with your career goals.
 - b. Ask about the requirements, action items, due dates, and selection process for the program.
 - c. If you meet the requirements and are interested in applying, proceed to step 6.
6. **Apply to the DoD-approved SkillBridge opportunity.**
 - a. Work with the company or organization to complete the enrollment or application process.
 - b. Applying to the opportunity does not guarantee acceptance.
7. **Selection / Acceptance into the program.**
 - a. The company or organization must provide an acceptance letter containing the required program details: program location, associated cost, length of training, employment outcome, and SkillBridge partner POC.

Note: Some SkillBridge opportunities may require command approval prior to acceptance. If this applies to the opportunity you are interested in, please contact your local MCCS Education Center or TRP office for assistance.

8. **Complete SkillBridge Application Packet.** (Available on <https://www.okinawa.usmc-mccs.org/skillbridge>)

Note: The approval authority to participate in any SkillBridge opportunity is the first field grade commander with court martial convening authority.

 - a. Required documents:
 - i. NAVMC 1320/1: USMC SkillBridge Packet Checklist
 - ii. NAVMC 1320/2: USMC SkillBridge Participant Screening
 - iii. Command Authorization Letter
 - iv. SkillBridge Program Provider Acceptance Letter
 - v. SkillBridge Ethics Brief Completion Page
 - b. Coordinate transportation plan with your chain of command and IPAC Outbound.
 - c. Coordinate housing arrangements for the duration of the SkillBridge training.
9. **Submit completed or disapproved packet to your nearest MCCS Education Center or TRP office or email the package to skillbridge@okinawa.usmc-mccs.org for review and final verification that all documents are complete.** Once everything is in order, your package will be signed and considered official. **Disapproved packages must also be submitted to the MCCS Education Center or TRP office with details from the command for the reason of disapproval.**

USMC SKILLBRIDGE PACKET CHECKLIST

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C., Chapter 58, Benefits and services for members being separated or recently separated; 10 U.S.C. 5041, Headquarters, Marine Corps; and E.O. 9397 (SSN), as amended; and SORN [MO1754-4](#).

PRINCIPAL PURPOSE: The primary purpose of this form is to support participation in the Marine Corps SkillBridge Program supported by the Department of Defense (DoD) SkillBridge (JTEST-AI) Voluntary Employment Training Program. Information will be used to determine eligibility and enrollment.

ROUTINE USES: Information will be accessed by Marine Corps SkillBridge personnel with a need to know in order to meet the purpose. Information may be disclosed to individuals or organizations authorized to provide services to the participant. A complete list and explanation of the applicable routine uses is published in the authorizing SORN available at: <https://dpcl.d.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570629/m01754-4/>.

DISCLOSURE: Providing information is voluntary; however, failure to provide the information will result in an inability to participate in the SkillBridge Program.

RECORDS MANAGEMENT: This form shall be managed in accordance with record schedule 1000-34, "General Correspondence (Military Personnel)" of SECNAV M-5210.1. **TEMPORARY:** Cutoff at CY. Destroy when 3 years old.

GENERAL INFORMATION

DoDI 1322.29 established the DoD SkillBridge Program, which provides transitioning Service members with the opportunity to develop job training and employment skills, including pre-apprenticeships, apprenticeships, and internships. SkillBridge is designed to facilitate the transition of eligible Service members into civilian sector occupations and careers with reasonable expectation and high probability of post-service employment and comparable living wage. SkillBridge is not to be used to further civilian education or for experiential purposes. Securing meaningful employment is the expectation. All participation request are to be forwarded to, reviewed and authorized by the first field grade commander, O-4 or above, in the Service member's Chain of Command with UCMJ authority; Battalion/Squadron Commander. For those under civilian leadership, a GS-13 or above. This convening authority cannot be delegated. Commanders are responsible for establishing and maintaining Service member accountability procedures for the duration of training.

SERVICE MEMBER INFORMATION

Rank:	Name (Last, First, MI):		
Current Unit (Company/ Battalion):		Separation/ Retirement Date:	
Government Email:		Civilian Email:	
Name of SkillBridge Provider / Training Dates:			DoD Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No
SkillBridge Location:			
Residential Address During Training:			
The Package Includes the following information in this order (all documents must be included in one attachment - separate documents will be returned):			
<input type="checkbox"/> 1) Administrative Action (AA) Form via Installation SkillBridge Office (if requesting an exception to policy from HQMC)			
<input type="checkbox"/> 2) DoD SkillBridge Participant Screening			
<input type="checkbox"/> 3) TRS 5-day Transition Readiness Seminar (TRS). Date Completed:			
<input type="checkbox"/> 4) Individual Program Vetting Document (If not DoD Approved)			
<input type="checkbox"/> 5) SkillBridge Provider Acceptance Letter (for everyone)			
<input type="checkbox"/> 6) Commander's Participation Letter (authorization)			
<input type="checkbox"/> 7) Other:			
SkillBridge Application Reviewed by First Sergeant/SNCOIC			
Name:		Signature:	
Rank:	Phone:	Email:	
SkillBridge Application Reviewed by Company Commander/OIC			
Name:		Signature:	
Rank:	Phone:	Email:	
Application Reviewed and Verified by Installation SkillBridge Representative			
Name:		Signature:	
Position:	Phone:	Email:	

USMC SKILLBRIDGE PARTICIPANT SCREENING**PRIVACY ACT STATEMENT**

In accordance with the Privacy Act of 1974 (Public Law 93-579), this notice informs you of the purpose for collection of information on this form. Please read it before completing the form.

AUTHORITY: 10 U.S.C., Chapter 58, Benefits and services for members being separated or recently separated; 10 U.S.C. 5041, Headquarters, Marine Corps; E.O. 9397 (SSN), as amended; and SORN [MO1754-4](#).

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APPLICANT INFORMATION

NAME (Last, First, MI.):		GRADE:	RANK:	BRANCH:
DEPARTMENT OF DEFENSE (DoD) IDENTIFICATION NUMBER:			MILITARY OCCUPATIONAL SPECIALTY:	
PHONE #:	EMAIL (Personal):		INSTALLATION:	
MAJOR SUBORDINATE COMMAND:		UNIT (Company and Battalion):		
PREREQUISITES	YES	NO	REMARKS	
1. Expected to be released from AD within 180 days of starting the course with an Honorable Discharge, including General Discharge Under Honorable Conditions. Date:	<input type="checkbox"/>	<input type="checkbox"/>		
2. Completed Transition Readiness Seminar or its equivalent if non-Marine Corps participant.	<input type="checkbox"/>	<input type="checkbox"/>		
3. Has sufficient time remaining under contract to complete the course prior to established separation date. Extensions to existing Expiration of Active Service (EAS) are not authorized. EAS Date:	<input type="checkbox"/>	<input type="checkbox"/>		
4. Has attended or completed a Marine Corps or DoD approved workplace ethics brief or training within the last 12 months or its equivalent if non-Marine Corps participant. Date Completed:	<input type="checkbox"/>	<input type="checkbox"/>		

NAVMC 1320/2 (1-22) (EF)**CUI (when filled in)**

Page 1 of 2

Previous versions are obsolete

Controlled by: USMC
CUI Category: PRVCY
LDC: DL ONLY
POC: MFPrivacy@usmc.mil

AEM Form Designer 6.5

STATEMENT OF UNDERSTANDING OR RESPONSIBILITIES AND AUTHORIZATION

Please read AND acknowledge the below statements indicating your full understanding of the policies and procedures.

1. I have inquired directly to the course point of contact and secured current course information as well as the additional requirements to apply. I acknowledge that I fully understand the prerequisites, funding, and selection process to apply for this course.

2. I understand that any omission or inaccurate statement provided in this form shall be grounds for course rejection or withdrawal.

3. I am fully aware that there are limited seats in the course, and acceptance into the course may be competitive. If I am selected to participate, my command will be notified via the SkillBridge provider's acceptance letter.

4. I fully understand the financial requirements to participate in this course, and I voluntarily assume any additional costs that may occur including travel, meals, parking, books, equipment, uniform, testing, and/or housing costs associated with course participation, and attest that this will not cause any financial hardship for me or my family.

5. I ensure that I shall return any items utilized throughout the course in good working order.

6. If the course utilizes my GI Bill, I verify that I have met with an Advisor to ensure that I fully understand the utilization of my education benefits.

7. I understand that I must maintain satisfactory attendance, progress, and safety regulations throughout my enrollment, as per course guidelines, and uphold all military and accountability requirements. I understand that the classroom will be my appointed place of duty, and failure to attend class may result in a charge of Unauthorized Absence.

8. I agree to adhere to military travel policy and any unauthorized travel will be grounds for dismissal. Course approved travel for interviews or to fulfill course duties may be required.

9. I understand that I am responsible for sponsoring base access for any guest attending the course graduation.

10. If required, I acknowledge I will have base access after EAS in order to complete SkillBridge.

11. I acknowledge that I have adequate housing, transportation and financial resources for the duration of my SkillBridge participation.

12. I acknowledge I am able and intend to start working upon leaving Active Duty Service per DoDI 1322.29.

13. I understand and allow the Course Provider and SkillBridge Program Office to contact me after my transition to gain information on my employment status for course evaluation and continuance. I authorize the use of both the application and employment information for program statistical purposes.

14. 5-Day Transition Readiness Seminar was completed on _____

PARTICIPANT ACKNOWLEDGEMENT

I understand that the SkillBridge location is my appointed place of duty. If I am removed or withdraw from the program, I must immediately contact my Commander and installation SkillBridge Representative. I am to report immediately back to my duty station.

PARTICIPANT (Print rank, Name):

SIGNATURE:

PHONE #:

DATE:

INSTALLATION SKILLBRIDGE REPRESENTATIVE (Print rank, Name):

SIGNATURE:

PHONE #:

DATE:



UNITED STATES MARINE CORPS

(COMPANY LETTERHEAD)

UNIT ###

EPO AP #####-####

SSIC
CODE
DATE

From: Commanding Officer, (COMMAND)
To: (RANK, FIRST NAME, MIDDLE INITIAL, LAST NAME, EDIPI/MOS USMC)

Subj: REQUEST FOR (NAME OF SKILLBRIDGE PROGRAM), VOLUNTARY
EMPLOYMENT SKILLS TRAINING PROGRAM IN THE CASE OF (RANK,
FIRST NAME, MIDDLE INITIAL, LAST NAME EDIPI/MOS USMC)

Encl: (1) NAVMC 1320/1: USMC SkillBridge Packet Checklist
(2) NAVMC 1320/2: USMC SkillBridge Participant Screening
(3) SkillBridge Program Provider Acceptance Letter

- (MARINE) is authorized to complete the (PROGRAM NAME) SkillBridge program in (LOCATION).
- Contingent upon approval, this command will support (MARINE) in completing the program from (START DATE) to (END DATE). Lodging has been secured at (ADDRESS).
- (MARINE) is required to coordinate out-processing plan with (CURRENT UNIT OR COMMAND)'s S-1 and the Installation Personnel Administration Center (IPAC) Outbound Section prior to departure.
- I have verified that (MARINE) has satisfied all requirements for the SkillBridge opportunity and the program is DoD-approved as per enclosures (1) and (2) and has gained acceptance to the opportunity per enclosure (3).
- Point of contact at this command is (RANK, NAME, PHONE NUMBER AND EMAIL (POC MUST BE A STAFF NCO OR HIGHER AND MAY NOT BE THE MARINE APPLYING)).

AUTHORIZED SIGNATURE

Note: Per NAVMC 1700.2
The first Commanding Officer
(CO) with court martial
convening authority maintains
final approval.



Acceptance Letter Requirements

According to NAVMC 1700.2 4.7.a.(4), the program acceptance letter from your SkillBridge opportunity will need to include the following program details:

1. **Length of training (start and end dates)**
2. **Location**
3. **Associated costs**
4. **Employment outcome (i.e. guaranteed interview, certifications, etc.)**
5. **SkillBridge partner POC information**

If the acceptance letter is missing the required program details, you will be asked to provide a new letter and/or additional documentation.

Sample Letter with Required Program Details:

1 January 2023

Dear Mr. John Doe,

On behalf of the Umbrella Corporation, I would like to offer you an internship with our company. Your internship will start on **March 3, 2023 and end June 6, 2023**. Your hours will be Monday to Friday from 8:00am to 5:00pm with one hour for lunch, not to exceed 40 hours a week.

The internship will take place at our Raccoon City office at **742 Evergreen Terrace, Raccoon City, IL 62629**.

There are no out-of-pocket costs for you to participate in this program. However you will be responsible for your own housing, travel, and equipment.

Our training will provide you with skills to prepare you for this industry. **At the end of the internship, you will be guaranteed an interview with our organization as well as the necessary skills and experience to acquire a similar position with another company if you so decide.**

Your point of contact will be Jody Schmtelli. You can contact her by email jschmtelli@parkour.com or by phone 212-897-1964.

We are excited to have you on our team! Please let us know if you have any questions.

Maddoc Mattice
Maddoc Mattice
Human Resources Manager

← **Date ranges of the program to show length of training.**

← **Address to show the location of the internship.**

← **Associated costs are clearly defined.**

← **Employment outcome of the program.**

← **SkillBridge Partner POC with contact information.**