Fort Liberty Career Skills Program
Application for Skills Training and Internships Commander's Program Information:
DODI 1322.29/AR 600-81

- The Career Skills Program (CSP) offers skills training and internships to transitioning Service members in the last 180 days before ETS/Retirement. For those going through a medical board/IDES or a chapter, talk to a CSP Administrator about when you can start a program.
- The purpose of the program is to help Service members exiting the Military get into high quality civilian careers and thus alleviate unemployment and underemployment among Veterans.
- All Service members can benefit from Career Skills Programs but our "at risk" Soldiers should be given priority. "At risk" Service members are those with the least amount of training/experience (ages 18-24 or first enlistments) and those leaving the Military sooner than planned due to medical or other reasons. These Soldiers are at greater risk of unemployment or underemployment.
- Each Soldier is allowed to participate in **ONE** Career Skills Program while on Active Duty. The exception to this rule is for medical separations. They can participate in multiple programs as time permits.
- Programs can vary in length but typically our skills training has set start and end dates. Internship length should be consistent with the amount and level of training being offered.
- Industry specific resume assistance, interviews, and job placement or referrals are a part of every CSP we offer.
- Commanders maintain accountability for Service members in our program.
- Units may assign eligible Soldiers participating in a CSP to **excess positions coded 9999** allowing military positions on modified table of organization and equipment, or table of distribution and allowances, authorization documents available for fill-by-replacement personnel.
- The Career Skills Program Installation Administrators monitor participation, completions, and full-time placements. Service members applying for Career Skills Programs grant permission to share this information for tracking purposes. They also consent to photo releases.

Career Skills Program Points of Contact:

usarmy.liberty.usag.mbx.liberty-dhr-tap-career-skills-program@army.mil

Fort LibertySoldier Support Center, Bldg 4-2843, Normandy Dr., 2nd Floor, Wing A, Rm 233.

Updated 23 Aug. 23

Participant Agreement

I, _____, hereby acknowledge the following:

_____ I understand that this Career Skills Program is my place of duty for the time period agreed upon with the program provider. This program is Full Time, 40 hours/wk.

_____ **In accordance with AR 600-8-10 PARA 5-12 (14) (e), I understand that I must return to Fort Liberty to clear the installation at the completion of my Career Skills Program.**

_____ I understand I will not be authorized passes, leave, or DONSAs (except emergency leave). Interns/students work the internship schedule. Students attend class as scheduled.

_____ I understand my command may terminate my participation in a CSP based on mission requirements i.e. major deployment, stop loss or administrative removal. Upon notification, I will immediately notify the CSP office to withdraw from the CSP and report back to my unit.

_____ If I have to miss a day of work/class, I agree to notify my supervisor and Career Skills Program Installation Administrator.

_____ I agree to comply with the safety requirements and directions from my supervisor and training staff for the safety of myself and other employees/classmates.

_____ When my internship/training program is complete, **I will return to the CSP office to complete an exit form and report my post military employment/education/training plans.** If I don't have a full time job offer when I leave the Military, I will contact the CSP office once I have a full time job offer or am accepted into a full time education/training program.

_____ I will communicate any limitations I have with the Program Manager and will not violate my profile during the internship/training.

_____ I understand Soldiers are unauthorized to receive any wages, training stipends, or any other form of financial compensation from the CSP provider during their participation in the program. Exception: Soldiers may accept provider-sponsored benefits such as funded travel to and from the CSP location or lodging, if offered to all participants--Military and civilian.

_____ I will provide my DD Form 2648-E (TAP Transition Checklist) or proof of TAP completion.

_____ I have reviewed this application for accuracy and to the best of my knowledge all the information provided is accurate.

Company Commander Name: _____ Phone Number: _____
Email Address: _____

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Soldier Signature Last 4 MOS ☐ Date ☐