From: Supervisory Education Services Specialist, Marine Corps Base Hawaii  
To: Commanding Officers, Marine Corps Base Hawaii  

Subj: MILITARY ACADEMIC SKILLS PROGRAM (MASP)  

Ref: MCO 1560.25  

Encl: (1) Program Description  
(2) Acknowledgement of Student Responsibilities  
(3) Testing/Academic Information  
(4) Calendar Year 2023 Schedule  

1. The Military Academic Skills Program (MASP) improves basic academic skills, and is encouraged to both career Marines and those Marines transitioning into the civilian community. Students gain proficiency in reading comprehension, written and verbal communication, and mathematics. Over four weeks, students receive 60 hours of English, plus 60 hours of math (all in the classroom).

2. MASP is conducted during normal daytime duty hours, with curriculum and instructors provided by the Hawaii State Department of Education’s Waipahu School for Adults - Windward Campus.

3. Commands are encouraged to refer Marines in the following categories:
   a. Enlisted personnel with an ASVAB General Technical (GT) score of 99 or below;
   b. Enlisted personnel who seek to improve their work performance, qualification for a lateral MOS move or specialized school, officer candidacy, or for college preparation.

4. Marines with a GT score of 99 or below are given priority placement. A GT score of 100-119 will be placed on a standby status. MASP is not designed for those with GT scores of 120 or above; those Marines are encouraged to use active duty Tuition Assistance (TA) and take CLEP & DSST exams. The Online Academic Skills Course (OASC) – the online version of MASP – is also available to them.

5. Applications are accepted in the following priority: ① active duty Marines, ② service members from other branches, ③ family members, and ④ on-base DoD civilians.

6. Failure to comply with all requirements in this information packet may result in the applicant’s disqualification to participate.

7. Accountability of your participating Marines is paramount, and taken very seriously by our team.

8. If you have any questions, please contact me at (808) 257-2654 or at craig.lockwood@usmc.mil.
1. **SCHEDULE:** Class meets in the Education Center (Bldg 220), Monday through Friday, for four weeks. Each day consists of three hours of English and three hours of math, and a one-hour lunch. No class on federal holidays. Class schedule is as follows:

   **MONDAY THROUGH FRIDAY:**
   - Morning class: 0800–1100
   - Lunch/errands: 1100–1200
   - Afternoon class: 1200–1500

2. **PARTICIPATION:** MASP students must attend both the English and math portions. Wounded Warriors may be given special consideration to complete a half curriculum (either English or math), with approval from the WW Detachment Command.

3. **PRE- AND POST-ASSESSMENT TOOL:** All MASP students are required to take the eCASAS exam on the first day and on the last day of MASP. This is how MASP tracks improvement. Marines may also take the TABE exam after MASP for TA eligibility.

4. **DRESS CODE:** Monday through Thursday, attire is appropriate military uniform of the day. On Friday, students may wear appropriate civilian clothing, per MCB Hawaii policy; shorts and slippers/flip-flops, however, are prohibited.

5. **ATTENDANCE:** Due to the accelerated nature of MASP, **100% attendance is essential for all participants.** Students are required to schedule appointments before and after class, or during their lunch break. Students may not use instruction time for outside appointments. Unit 72s and 96s do not apply while attending MASP. No class is conducted on federal holidays.

6. **UNIT DUTY:** MASP is an intensive academic program with required homework. Therefore, we respectfully request that no unit duty or activities that will interfere with student participation or study be scheduled Sunday through Thursday evening.

7. **COST:** There is a one-time, non-refundable $40 cash enrollment fee paid to the Waipahu School for Adults – Windward Campus, collected on the first day of class.

8. **CONTACT:** Any questions regarding program requirements or class attendance should be directed to the Education Center at (808) 257-2158.
## ACKNOWLEDGEMENT OF STUDENT RESPONSIBILITIES

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<th>Your personal email</th>
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Please read and **INITIAL** the following four statements indicating your acknowledgement:

- a. I understand that I must comply with all requirements to be eligible to participate in MASP.
- b. I understand that assignment to MASP represents a commitment to attend **ALL** classes. The classroom will be my appointed place of duty. Failure to attend class without notification may result in a charge of Unauthorized Absence (UA). Unexcused absences will be reported directly to my unit Command.
- c. I understand that curriculum and testing will be provided by the Waipahu School for Adults – Windward Campus (WSA-WC).
- d. I understand that I will be contacted by WSA-WC in approximately six months to provide follow-up information, as mandated by federal data reporting requirements.

**Signature** of Applicant ________________________________  **Today’s Date**

**Name** of 1st Sergeant ___________________________  **Signature** of 1st Sergeant ___________________________  **Phone** for 1st Sergeant ___________________________  **Today’s Date**

**Name** of Commanding Officer (CO), or Unit Education Officer (UEO), or Officer in Charge (OIC)

______________________________  **Signature** of CO, or UEO, or OIC ________________________________  **Today’s Date**
TESTING / ACADEMIC INFORMATION

1. YOUR CURRENT ASVAB SCORES:
   My AFQT Score = _________  My GT Score = _________
   
   Scores can be found in your Basic Training Record (BTR), via Marine Online (MOL)

2. TEST OF ADULT BASIC EDUCATION (TABE):
   - [ ] I have not taken TABE  /  [ ] I have taken TABE previously, on: __________________________
     Approximate date you took TABE

3. PRIOR COLLEGE CREDIT:
   - [ ] I do not have prior college  /  [ ] I do have prior college: __________________________
     Describe how much prior college credit

4. I AM TAKING MASP FOR THE FOLLOWING REASON(S):  Check all that apply
   - [ ] Active Duty Tuition Assistance (TA)
   - [ ] Lateral MOS move
   - [ ] Officer candidacy
   - [ ] Reenlistment
   - [ ] College preparation prior to Transition
   - [ ] Other: __________________________
     Please explain

In at least 50 words, explain your personal and professional goals and reason for attending MASP:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
CONSENT TO RECEIVE AND RELEASE INFORMATION

Student’s Name: ____________________________________________

First Name  Last Name
Middle Initial

I hereby grant The Waipahu Community School for Adults (WCSA) permission to:

☐ Receive  ☑ Release

The following document(s)/information, on the above named student, except that which is legally not subject to disclosure by law, and is covered under the Hawai’i Revised Statutes, §325-101 Infections and Communicable Diseases (HIV Infection, ARC, and AIDS); §329-68 Uniform Controlled Substances Act (Protection of records; divulging confidential information prohibited); §329-B6 Substance Abuse Testing (Test Results); and §8-34, the Protection of Educational Rights and Privacy of Students and Parents to or from the agency or person listed below:

U.S. Marine Corps Kaneohe Marine Base Education Center -Military Academic Skills Program

For the Purpose of: tracking and monitoring progress; and determining and implementing adequate student supports.

I understand that in an effort to assist me, it may be necessary for the agency (designated by this form) and staff to obtain and release my information including but not limited to: name, contact information, basic demographic, program status, and requested support or service.

I understand that the information will be kept confidential within the authorized parties, and certify it is being requested or released with my informed consent.

I understand that I have the right to rescind my consent for future use by notifying WCSA staff, however information shared prior to rescinding my consent cannot be removed.

This personal document(s)/information will be transmitted to the agencies or person named above only on the condition that it not be shared with another outside agency or other person(s) without the written consent of the eligible student (an “eligible student” means a student who has reached 18 years of age or is attending a postsecondary institution at any age).

Student Signature: _______________________________ Date: ________________

Printed Name: _______________________________ Phone: ____________________

Physical Address: __________________________________________

Street  City  Zip Code

Mailing Address: __________________________________________

Street  City  Zip Code
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