1. The Marine—retaking the AFCT--is responsible for scheduling the AFCT test with the Military Testing Coordinator at email address and telephone listed above. Enclosure (1) is provided with the available dates open for retaking the AFCT test.

2. Headquarters Marine Corps requires that ALL Marines—enlisted and officer—provided a letter, signed by COMMANDING OFFICER at the BATTALION/SQUADRON LEVEL (not Company level) and/or signed "By direction" by any staff officer with by direction authority from the Commanding Officer provided with a CERTIFIED TRUE COPY printout of the Marine's current AFCT test scores from their IPAC. Enclosure (2) and (3) are provided.

3. Marines will not be retested earlier than six (6) months from the last AFCT/ASVAB test unless approved by CMC (MSAB) and will not be approved to retake the AFCT test until a minimum of 90 days have passed from the last retest date.

4. Recruiters, returning to the FMF must request a waiver to retest if they have not been in the FMF for 6 months are longer.

5. SCORE REPORT: AFCT scores are reported in MCTFS (3270) via HQMC--14-30 days after the test date.

6. The military member must have a valid military ID card to take the AFCT aboard Camp Lejeune.

7. For any and all questions pertaining to retaking the AFCT test please visit CMC website: https://www.manpower.usmc.mil/webcenter/portal/MPA/Testing
# ARMED FORCE CLASSIFICATION TEST (AFCT) AUTHORIZATION LETTER FOR MARINES

John A. Lejeune Education Center – Testing Department (Rm 120) – 825 Stone Street – Camp Lejeune, NC 910-451-3092 – paul.parker@usmc-mccs.org

### AFCT TESTING DATES

**TEST TIME-0730** (The AFCT test is administered on Mondays)

<table>
<thead>
<tr>
<th>Month</th>
<th>Date(s)</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td><em>2</em>, 7, 14, <em>22</em>, 28</td>
<td>2.5 HOURS</td>
</tr>
<tr>
<td>February</td>
<td>4, 11, <em>19</em>, 25</td>
<td>2.5 HOURS</td>
</tr>
<tr>
<td>March</td>
<td>4, 11, 18, 25</td>
<td>2.5 HOURS</td>
</tr>
<tr>
<td>April</td>
<td>1, 8, 15, 22, 29</td>
<td>2.5 HOURS</td>
</tr>
<tr>
<td>May</td>
<td>6, 13, 20, <em>28</em></td>
<td>2.5 HOURS</td>
</tr>
<tr>
<td>June</td>
<td>3, 10, 17, 24</td>
<td>2.5 HOURS</td>
</tr>
<tr>
<td>July</td>
<td>1, 8, 15, 22, 29</td>
<td>2.5 HOURS</td>
</tr>
<tr>
<td>August</td>
<td>5, 12, 19, 26</td>
<td>2.5 HOURS</td>
</tr>
<tr>
<td>September</td>
<td><em>3</em>, 9, 16, 23, 30</td>
<td>2.5 HOURS</td>
</tr>
<tr>
<td>October</td>
<td>7, <em>15</em>, 21, 28</td>
<td>2.5 HOURS</td>
</tr>
<tr>
<td>November</td>
<td>4, <em>12</em>, 18, 25</td>
<td>2.5 HOURS</td>
</tr>
<tr>
<td>December</td>
<td>2, 9, 16, 23, 30</td>
<td>2.5 HOURS</td>
</tr>
</tbody>
</table>

* ICAT-AFCT MOVED TO THE NEXT AVAILABLE DATE—DUE TO HOLIDAY*

Enclosure (1)
From: Commanding Officer, (Battalion or Squadron Commander, Only)  
To: Military Testing Officer, Education Assistance Branch, 
Personal and Professional Development Program, Marine and 
Family Programs, Marine Corps Community Services, Camp 
Lejeune  
Subj: REQUEST FOR IN-SERVICE RETEST OF ARMED FORCES 
CLASSIFICATION TEST (AFCT) ICO (Rank/Full Name/EDIPI/MOS)  

Ref: (a) MCO 1230.5C  
Encl: (1) MCTFS Print-out of scores for (Rank/Full Name)  

1. In accordance with the reference, request an in-service 
retest for the Armed Forces Classification Test.  
   a. (Rank/Name) took the ASVAB on (Last ASVAB Test Date) 
   and did not acquire the required scores for (LATERAL-MOVE MOS OR 
MILITARY SCHOOL or OFFICER PROGRAM OR UNIT.)  
   b. The program the Marine is applying for needs a (GT or 
EL or MM) score of (Required Score for the program the marine is 
requesting). (His/Her) current score is (Current ASVAB Score.)  

2. Enclosed is a CERTIFIED TRUE copy of the Marine’s TEST screen 
from MCTFS.  

3. The point of contact for this request is CO/OIC Name, 
Military Unit, at Unit Phone Number.  

I. M. COMMANDING  
By Direction (if applicable)  

EXAMPLE  

Enclosure (2)
EDPI: 1234567890  
NAME INCHARGER, IAM  
RUC: 00000  
COMPANY CODE: Z 0pres-grade: E10 RECSTAT: 4  
COMP CODE: 11  
PLT CODE: 2PLT  
TRNGRP:  
R-RECSTAT:  
RCOMP-CODE:  

*CLASS TEST*  
*AFQT ASVAB*  
*LANGUAGE SCORES*  
VER: 03E  
SCORE: 40  
DLAB SCORE: 000  
TYPE:  
FORM: 19F  
DATE: 00000000  

*ASVAB TEST*  
*GCT SCORES*  
*MISC TEST SCORES*  
GT 096  
GCT 096  
MM 091  
PA 000  
EL 092  
AR 000  
CL 000  
RV 000  
AC 000  

*FOREIGN LANGUAGE*  
*SELF PROFESSED LANG*  
CD1 CD2 CD3 CD4  
CD1 CD2 CD3 CD4  

ENSURE THE COPY CAN BE SCANNED AND SENT TO HQMC. IF THE BACKGROUND IS DARK OR PURPLE, THE SCAN COPY IS HARD TO SEND TO HQMC.