



**UNITED STATES MARINE CORPS**  
INSTRUCTIONAL MANAGEMENT SCHOOL  
ASSAULT AMPHIBIAN SCHOOL BATTALION  
BOX 555041  
CAMP PENDLETON, CALIFORNIA 92055-5041

1500  
IMS

From: Director  
To: Recipient

Subj: CURRICULUM DEVELOPER COURSE 2004030; WELCOME ABOARD  
LETTER

Ref: (a) MCO 1553.2A

Encl: (1) CDC prerequisite checklist

1. On behalf of Instructional Management School (West), I would like to congratulate you on being selected to attend the Curriculum Developer Course (CDC) at our school. The following information will assist you in preparing for your class date.
2. The class you are scheduled for will commence at 0700 on 3 May 2004. We are located in building 41342 at Las Flores, MCB Camp Pendleton, CA. The uniform of the day for the course is the camouflage uniform. If you are traveling on orders, please have a copy and original ready for check in purposes. Students requiring billeting must make reservations with the Camp Pendleton billeting office at (DSN) 365-3451/3732 or (Com) (760) 725-3451/3732.
3. In accordance with reference (a), all of the prerequisites in enclosure (1) will be completed immediately and turned in the morning of training day one. Additionally, all students attending this course must complete the on-line Operational Risk Management (ORM) training module. To complete this training, log on to the following web site: <https://www2.cnap.navy.mil>. Click on "ORM University." You must take the ORM Fundamentals Course, which is an introduction to the ORM process, techniques, and basic tools. Upon completion, you must print a certificate of completion and bring it with you on the first day of class. You are also required to complete the Systems Approach to Training (SAT) Interactive Multimedia Instruction (IMI), which is located online at <http://www.marinenet.usmc.mil> before attending this course. The prerequisites are mandatory and failure to complete them will lead to immediate disenrollment. Furthermore, the enclosure emphasizes that your command understands that you will be temporarily assigned to IMS as a student for 10 business days.
4. Due to the rapid pace of the instruction, students will not be allowed to miss any academic classes. Therefore, ensure that all other personal business is conducted before and after class. Emergency situations will be considered on a case-by-case basis.

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5. My staff and I are looking forward to meeting you and hope the learning experience at IMS will benefit you personally and professionally. If you require further information, contact either Mr. Hays at (DSN) 365-4746/ or commercial (760) 725-4746 or SSgt Halstead at (DSN) 365-4271 or commercial (760) 725-4271.

  
A. M. MALDONADO

From: Academics Officer (command name)  
 To: Director, Instructional Management School

Subj: NOMINATION OF (Rank)\_\_\_\_\_ (Full name)\_\_\_\_\_ (SSN)\_\_\_\_\_  
 TO THE CURRICULUM DEVELOPER COURSE (CID M10T4B1 CLASS # 2004030)  
 ATTENDANCE CONFIRMATION AND CHECK-IN LIST.

1. The above named nominee has been screened to determine if the below prerequisites have been met. The nominee will be available to be TAD for the full 10 working days.

CDC PREREQUISITES	YES	NO
XX	XXXX	XXXXX
1. Is proficient with Microsoft Word and PowerPoint		
2. Has good written communication skills.		
3. Has completed the MCAIMS tutorial. <a href="http://www.tecom.usmc.mil/gtb/mcaims/CBT.htm">http://www.tecom.usmc.mil/gtb/mcaims/CBT.htm</a>		
4. Has completed the SAT IMI. ( <a href="http://www.marinenet.usmc.mil/">http://www.marinenet.usmc.mil/</a> )		
5. Has completed the ORM IMI. ( <a href="https://www2.cnap.navy.mil">https://www2.cnap.navy.mil</a> )		

2. I understand that a NO response on the above checklist disqualifies the nominee and his/her name will not be entered into BNA. I understand that the Director of IMS may grant a waiver to this policy on a case-by-case basis.

3. I certify that I have screened the above named nominee for the requirements to attend the IMS Course.

Print Name / Billet \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_