

RESERVE DRILLING REQUEST

Transfer from IRR to SELRES

1. Date of Request:				
2. Name /Rank/SSN/EMLID				
3. Current Mailing Address:				
City:	State:	Ziţ	o:	
4. Home Number: () _				
5. Cell Number: ()				
6. Work Number: ()				
7. E-mail Address:				
8. Are you in the ISL due to	Weight?			
9. Date of Last Physical:				
10. Do you have any medical				
11. End of Enlistment (EOE)	:			
12. Requesting SELRES Place	cement in wh	nich City /	State / Unit?	
13. Please provide your Posit	tion Number	(Billet N	umber) if given:	
14. How Long Do You Antic	cipate SELRI	ES Affilia	tion?	
	Cian	atrino (XC	T	
	sign	uure (If yo	ou E-mail, no signature required)	
N	*1/6 /	'1 .1 ' C		

Note: You may email/fax/mail this form to one of the following:

Enlisted

Sharon.M.Koeller@uscg.mil

Fax: 703-235-1883

Coast Guard Recruiting Command

2300 Wilson Boulevard, Suite 500 Arlington, VA 22201-3308 Attn: FS1 Koeller Officer

ARL-PF-CGPC-rpm-Query@uscg.mil

Fax: (202) 493 -1776

Coast Guard Personnel Command (RPM1)

4200 Wilson Boulevard, Suite 950 Arlington, VA 22203-1804 Attn: Status

If you wish to read more about the Coast Guard Reserve, visit our website at: http://www.uscg.mil/rpm

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