

PERSONNEL ACTION

For use of this form, see AR 600-8-6 and DA PAM 600-8-21; the current proponent agency is ODCSPER

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Title 5, Section 3012, Title 10, USC, E.O. 9397.
PRINCIPAL PURPOSE: Used by soldier in accordance with DA PAM 600-8-21 when requesting a personnel action on his/her own behalf (Section III).
ROUTINE USES: To initiate the processing of a personnel action being requested by the soldier.
DISCLOSURE: Voluntary. Failure to provide social security number may result in a delay or error in processing of the request for personnel action.

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| 1. THRU (Include ZIP Code) COL Wes Welker 113 FA BN Fort Somewhere, USA | 2. TO (Include ZIP Code) AHRC ATTN: OPL-C (Mr. Strout) 1600 Spearhead Division Ave. Fort Knox, KY 40122 | 3. FROM (Include ZIP Code) CPT TOM Brady 113 FA BN Fort Somewhere, USA |
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SECTION I - PERSONAL IDENTIFICATION

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| 4. NAME (Last, First, MI) Brady, Tom P. | 5. GRADE OR RANK/PMOS/AOS CPT/11B | 6. SOCIAL SECURITY NUMBER 123456789 |
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SECTION II - DUTY STATUS CHANGE (AR 600-8-6)

7. The above soldier's duty status is changed from _____ to _____ effective _____ hours, _____

SECTION III - REQUEST FOR PERSONNEL ACTION

8. I request the following action: (Check as appropriate)

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| <input type="checkbox"/> Service School (Enl only) | <input type="checkbox"/> Special Forces Training/Assignment | <input type="checkbox"/> Identification Card |
| <input type="checkbox"/> ROTC or Reserve Component Duty | <input type="checkbox"/> On-the-Job Training (Enl only) | <input type="checkbox"/> Identification Tags |
| <input type="checkbox"/> Volunteering For Oversea Service | <input type="checkbox"/> Retesting in Army Personnel Tests | <input type="checkbox"/> Separate Rations |
| <input type="checkbox"/> Ranger Training | <input type="checkbox"/> Reassignment Married Army Couples | <input type="checkbox"/> Leave - Excess/Advance/Outside CONUS |
| <input type="checkbox"/> Reassignment Extreme Family Problems | <input type="checkbox"/> Reclassification | <input type="checkbox"/> Change of Name/SSN/DOB |
| <input type="checkbox"/> Exchange Reassignment (Enl only) | <input type="checkbox"/> Officer Candidate School | <input checked="" type="checkbox"/> Other (Specify) |
| <input type="checkbox"/> Airborne Training | <input type="checkbox"/> Asgmt of Pers with Exceptional Family Members | B.O.P |

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|---|-----------------------------------|
| 9. SIGNATURE OF SOLDIER (When required) | 10. DATE (YYYYMMDD) 2012-07-15 |
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SECTION IV - REMARKS (Applies to Sections II, III, and V) (Continue on separate sheet)

I request permission to compete for the following programs in order of my preference:
 1. Army Congressional Fellowship; 2. JCS/OSD/ARSTAF Internship; 3. Cyber Command Scholarship.
 My DLAB Score is: I have not taken the DLAB test and none of the programs listed above requires DLAB Test scores.
 MY GRE Scores are: Verbal/155; Quantitative/155; Analytical Writing/4. I took the test on 20120715.
 My undergraduate GPA is 4.0. I graduated on 20100715.
 My graduate GPA is: None.

SECTION V - CERTIFICATION/APPROVAL/DISAPPROVAL

11. I certify that the duty status change (Section II) or that the request for personnel action (Section III) contained herein -
 HAS BEEN VERIFIED RECOMMEND APPROVAL RECOMMEND DISAPPROVAL IS APPROVED IS DISAPPROVED

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|---|---------------|-----------------------------------|
| 12. COMMANDER/AUTHORIZED REPRESENTATIVE COL Wes Welker | 13. SIGNATURE | 14. DATE (YYYYMMDD) 2012-07-16 |
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