

# TRANSFER

177th Fighter Wing , Force Support Squadron

Customer Service Help Desk

609-761-6227

**APPLICATION FOR READY RESERVE ASSIGNMENT**  
**PRIVACY ACT STATEMENT**  
**AUTHORITY:** Title 10 U.S.C., Section 275 and Executive Order 9397.  
**PRINCIPAL PURPOSES:** Request for Ready Reserve assignment must contain current personal information to complete processing. Use of the member's social security number is necessary to make positive identification of the individual and his or her records.  
**ROUTINE USE:** This information may be disclosed, upon request, to Federal, State, and local agencies for law enforcement purposes or in pursuit of their official duties and to the Department of Justice for litigation.  
**DISCLOSURE IS VOLUNTARY:** An individual who chooses not to submit necessary documentation will not be eligible for Ready Reserve assignment.  
**INSTRUCTIONS:** Complete the application in duplicate. If you need additional space for any item, attach another sheet which indicates the applicable item number(s).

1. NAME (Last Name, First, Middle Name)	2. RANK	3. DATE OF RANK	4. SSN
5. HOME ADDRESS (If different than permanent address, indicate both.)	6. PHONE (Include prefix)	7. AFSC	
8. DATE OF BIRTH		9. HEIGHT (Inches) (Mandatory)	10. WEIGHT (Mandatory)
11. % DISABILITY RECEIVED		12. I have been counseled concerning the Air Force direct deposit/electronic funds transfer.	
13. OFFICER <input type="checkbox"/> REGULAR <input type="checkbox"/> RESERVE		14. REMARKS/AERONAUTICAL R... requested assignment will authorize type of aircraft and hours in each, date of last physical examination.)	
15. PRESENT ASSIGNMENT AND ATTACHMENT (Indicate military branch, unit address, training, and retirement category, MPF street address, and phone.)		16. ASSIGNMENT DESIRED (Indicate military branch, unit address, training, and retirement category or description.)	
17. MILITARY SCHOOLS ATTENDED (Indicate date, course number, title, and duration.)		18. MILITARY EXPERIENCE (Indicate highest grade, and duration. List no... tions for as...	
19. CIVILIAN EDUCATION (Indicate years completed, major subject, and degree, if any.)		20. CIVILIAN EXPERIENCE (In chronological order showing latest experience first, indicate pertinent experience to include employers, positions held, and duration.)	
21. I certify I have/have not (circle one) misused any government travel charge card (used for other than official government travel), or been seriously delinquent (payments not received by card issuer within 60 days from the billing date). I understand if I make a fraudulent statement I am subject to immediate discharge action.		22. For individuals requesting assignment to a training site beyond 100 miles or 3 hours enroute (flight time) (AFI 26-2115). I acknowledge my responsibility for any hardships, including financial, incurred in performing the duties of the assignment. I understand I will not be reimbursed for travel expenses incurred for inactive duty training.	
23. For all individuals requesting assignment to the Ready Reserve (Cat A Unit, IMA position, Cat E Points Only Program, Individual Ready Reserve.) I certify that I have/have not (circle one) had a UIF established (or similar derogatory information file which may include an Air Force Captain's Mast, or Court Martial action) within the last 2 (enlisted) or 5 (officer) years. I understand that if I make a fraudulent statement I am subject to immediate discharge action.		24. I have been briefed on the Anthrax vaccine immunization program. I understand I will be immunized against anthrax if required under the new Air Force Anthrax Implementation Plan, dated, 11 October 2002, and its successor guidance.	
25. If this assignment requires retraining, I agree to attend the applicable technical school.		26. I certify that the data contained herein are true and correct to the best of my knowledge. I also acknowledge that upon my assignment to the Ready Reserve, I am responsible to notify my employer of my Ready Reserve status and that as a Ready Reservist, I shall be subject to involuntary order to active duty in time of war or national emergency declared by the Congress, a national emergency declared by the President, or when otherwise authorized by law.	
SIGNATURE OF APPLICANT		DATE (YYYYMMDD)	

AF IMT 1288, 20040803, V1 PREVIOUS EDITIONS ARE OBSOLETE



**ANG members have 90 days to complete conditional release process— After 90 days package will be considered invalid.**

Fill in all information (if applicable)

INITIAL

# GUARD TO GUARD

- Recruiting points of contact in the desired state
- **Conditional release form (AF IMT 1288)**
- **Resignation Letter**
- Last AF 526, ANG/USAFR Point Credit Summary
- Latest physical
- DD Form 93, Record of Emergency Data
- Copy of the latest Record Review Rip (RRP)
- Any other pertinent or necessary documents

**Note: Failure to provide documents could result in pay and entitlement issues for the member.**

A **state-to-state transfer** must meet Fitness Standards. If the member does not meet Fitness Standards, the applicant will normally not be allowed to enlist under these circumstances, the ANG recruiter will contact the losing unit to determine if the member is enrolled in Fitness Program. If the applicant is currently enrolled, the gaining unit commander must be notified of their current status in the Fitness Program. The final decision on accepting the member will be that of the **gaining unit commander**.

- **Upon enlistment/reenlistment** into the new unit, you must provide a copy of your **DD Form 4 to your losing unit FSS/FSMPs** immediately upon enlistment/reenlistment. Failure to do so could result in delays in the discharge process from the losing state or territory and pay/entitlements

Jersey Devils

Devils



# TRANSFER DIFFERENT COMPONENT

**3. ACKNOWLEDGEMENT OF SERVICE MEMBER**

a. I request a conditional release to process for entrance into another component of the Military Service. If I am a member of the National Guard or Reserve, I understand that I must attend all scheduled training until such time as I am enlisted or appointed into another Service. I also understand that I am to keep my current commander informed of any change in my status.

b. OFFICER MEMBER ONLY. I hereby tender my resignation from the \_\_\_\_\_ (losing component); request that it be accepted contingent upon actual appointment or enlistment in the \_\_\_\_\_ (gaining component), and be effective the day preceding the date of my acceptance of appointment or enlistment.

c. ENLISTED MEMBER ONLY. I understand I will be discharged from my current status effective the day preceding the date of my enlistment or appointment.

d. MEMBER SIGNATURE  
SIGN

e. DATE SIGNED  
DATE

**4. RECRUITER REQUEST FOR CONDITIONAL RELEASE**

a. Request conditional release to enlist/appoint member into the \_\_\_\_\_ (Service/Component)

b. NAME OF RECRUITER (Last, First, Middle Initial)

c. SIGNATURE

d. DA

e. TITLE  
**FILL IN ALL REQUIRED**

**SECTION II - APPROVAL/DISAPPROVAL**

5. (X as applicable)

a. APPROVED. Individual is recommended and conditional release is granted. The release is valid until \_\_\_\_\_

b. DISAPPROVED. Release is not granted. (Explain in "Remarks.")

**6. AUTHORIZING OFFICIAL**

a. NAME (Last, First, Middle Initial)

b. TITLE

c. TELEPHONE NUMBER (Include area code)

d. ADDRESS

(1) STREET (2) CITY (3) STATE (4) ZIP

e. SIGNATURE  
**INFORMATION**

f. DA

**SECTION III - NOTIFICATION OF ENLISTMENT/APPOINTMENT ACTION**

7. The member was administered the oath of enlistment or appointment into \_\_\_\_\_



NEW JERSEY AIR NATIONAL GUARD  
HEADQUARTERS 177TH FIGHTER WING  
EGG HARBOR TOWNSHIP

RESIGNATION  
LETTER  
EXAMPLE

DATE

MEMORANDUM FOR 177-CC

FROM: NAME  
ADDRESS

SUBJECT: Request for Resignation

1. I, NAME, SSAN hereby request a voluntary discharge from the New Jersey Air National Guard.
2. The reasons for the submission of this separation are: REASONS
3. I do have remaining Military Service Obligations.
4. I understand that, if separation is accepted, I may be transferred to the IRR.
5. I will consult with each person requiring endorsement and out-process from the unit with completing an out-processing checklist.
6. I understand that prior to Wing Commander Approval, I must participate fully in Unit Training Assemblies (UTA), annual training, and any other obligated training requirements.
7. If addition information is needed, please contact me at PHONE NUMBER & EMAIL

SIGNATURE BLOCK - WET SIGN

## Required Documents

- Recruiting points of contact in the desired state
- Conditional release form (DD FORM 368)
- Resignation letter
- Copy of the latest Record Review Rip (RRP)
- DD Form 93, Record of Emergency Data
- Latest physical
- Last AF 526, ANG/USAFR Point Credit Summary
- Any other pertinent or necessary documents