

# AIR FORCE ENLISTED GUIDE



**TO BECOME AN OFFICER IN THE  
AIR NATIONAL GUARD**



## NATIONAL GUARD BUREAU

3500 FETCHET AVENUE  
ANDREWS AFB MD 20762-5157

12 April 2012

### MEMORANDUM FOR PROSPECTIVE OFFICER APPLICANT

FROM: Angela J. Petri, SMSgt, USAF

SUBJECT: Officer Application Process

Dear Prospective Officer Applicant,

Congratulations on your desire to become an officer in the Air National Guard (ANG). You have worked very hard to achieve your educational goals. The ANG is always looking for strong individuals to fill future leadership roles.

The ANG is excited to have a new application process for officer applicants. This process is customer focused with a clear path to apply through your local ANG Designated Officer Recruiter (DOR) assigned to the Recruiting and Retention team. This new approach allows you to select which ANG units you are willing to travel to and interested in joining. Upon prequalification at the National Guard Bureau (NGB), your application will be catalogued into a system that allows units to select from and will remain in the system for up to 24 months. This system highlights interest by applicant, position and location.

The attached guide was developed to help you and your DOR with all the required paperwork for the application. Please use the provided checklist and guide when accomplishing your application. Please ensure all checklist items are complete prior to submitting the application to your DOR.

If you have any questions regarding this new application process, please contact your local ANG DOR. Thank you again for your interest and good luck achieving your goal of becoming an officer in the ANG.

A handwritten signature in cursive script that reads "Angela J. Petri".

ANGELA J. PETRI, SMSgt, USAF  
Superintendent, ANG Officer Recruiting

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## **BASIC PREQUALIFICATION STANDARDS FOR ANG OFFICER APPLICATION**

### **AGE**

- Maximum age for initial non-rated (non flying) line applicants must be commissioned prior to their 35<sup>th</sup> Birthday. Exception to Policy (ETP) for nonrated can be requested with applicants with prior service if applicant is commissioned prior to 40<sup>th</sup> birthday.
- Undergraduate Flying Training (UPT) and Undergraduate Navigator Training (UNT) applicants must be less than 30 years old prior to entering into formal UFT/UNT training and EPTs are only approved under very rare circumstances for exceptionally qualified applicants.
- Maximum age for initial appointment in health professional specialty is less than 47 years, and ETPs can be submitted for specialties with a critical manning need.
- Maximum age for Judge Advocate General (JAG) appointment is 34, and 37 is the maximum age for ETP.
- Maximum age for Chaplain is less than 40 years for Non-Prior Service (NPS), and 42 with two years satisfactory prior service. ETPs can be submitted for hard to fill Chaplain Specialties such as Catholic Chaplains. (Reference is ANGI 36-2005 Chapter 3)

### **OFFICER TESTING**

All Line officers require the Armed Forces Qualification Test (AFOQT). If you haven't taken the AFOQT, talk with your Base Education Training Office or DOR. Ensure that you are prepared for the test since applicants are only allowed to test twice in a lifetime. Wait period for retest is 180 days (Reference AFI 36-2605). Below are minimum AFOQT scores:

Category	Verb	Quant	Pilot	Nav	Total
UPT	15	10	25	10	50
UNT	15	10	10	25	50
LINE	15	10	N/A	N/A	N/A

(Reference is ANGI 36-2005 Table 3.4)

Graduate Record Exam (GRE) or Graduate Management Admission Test (GMAT) is required for the 41AX, Health Service Mgt, AFSC. GRE: 800, GMAT: 400 (Reference is ANG/SG MSC guidance)

### **AFSC QUALIFICATION**

Qualifications for specific AFSCs can be found in the Air Force Officer Classification Directory (AFOCD). This publication is updated at least every six months and can be found on the Air Force Personnel Services website:

<https://gum-crm.csd.disa.mil> (type AFOCD in search field for most current directory)

The following AFSCs have specific education requirements: 13XX (Space/Missile), 15XX (Weather), 17XX (Cyber Ops), 32XX (Civil Engineer), 41XX (Health Services), 42XX (Biomed), 44XX (Physician), 45XX (Surgery), 46XX (Nurse), 47XX (Dental), 48XX (Aerospace Med), 51XX (JAG), 52XX (Chaplain), 61XX (Scientific), 62XX (Dev Eng), 64XX (Contracting), 65XX (Finance)

### **MORALS**

Officers are held to high moral standards to include law violations and drug usage. Any applicant that has experimented with marijuana 6 or more times will require a drug waiver (Reference is Pre-Service Drug Abuse Message). Questions about law violations can be found in ANGI 36-2005 Attachment 7.

*12 April 12: Please note that officer qualification standards are subject to change. All officer applications are only basic prequalification, and upon selection, all applicants will be required to complete a commissioning package and physical that could result in disqualification. Medical prequalification should be made by qualified medical personnel.*

**\*BE SURE TO OBTAIN THE CURRENT VERSION FROM YOUR DESIGNATED OFFICER RECRUITER (DOR).**

**OFFICER APPLICANT PREQUALIFICATION CHECKLIST  
CURRENT ANG/AF/AFRES ENLISTED**

- \_\_\_ A1YO FM 1 ANG Officer Application Worksheet – complete with your DOR.
- \_\_\_ A1YO FM 3 ANG Officer Application Statement of Understanding – complete with your DOR.
- \_\_\_ AF Form 883, Privacy Act Form  
<http://www.e-publishing.af.mil/shared/media/epubs/af883.xfd>  
- Print and review the form. Do not sign it until you are with your DOR.
- \_\_\_ AF Form 2030, Drug and Alcohol Abuse Certificate  
<http://www.e-publishing.af.mil/shared/media/epubs/af2030.xfd>  
- Print and review the form. Do not complete it until you are with your DOR.
- \_\_\_ Resume and cover letter
- \_\_\_ Official AFOQT scores  
<https://w20.afpc.randolph.af.mil/afoqtsnet20/DODBanner.aspx>  
- Print the page for turn-in to your DOR.
- \_\_\_ GRE or GMAT (if applying for a 41AX Health Administrator position and do not hold the AFSC)
- \_\_\_ Pilot Candidate Selection Method (PSCM) Score and copy of private pilot's license (if applicable)
- \_\_\_ Official College Transcripts. Unsealed accepted. No Internet transcripts allowed.
- \_\_\_ Certificate of Admission to Bar (if applicable)
- \_\_\_ Medical/Dental/Nursing License (if applicable)
- \_\_\_ Personal Individual Medical Readiness (PIMR) found on the AF Portal > Featured Links > Fitness & Health > Medical Readiness-Deployment Health > My Individual Medical Readiness Status  
- Print the page for turn-in to the DOR.
- \_\_\_ Passing Fitness Test results within the last 12 months found on the AF Portal > Featured Links > AFFMS-AF Fitness Management System  
- Print the page for turn-in to the DOR.
- \_\_\_ All Prior Service Records: DD Form 214 (Certificate of Release or Discharge from Active Duty) and/or NGB Form 22 (National Guard Report of Separation and Record of Service, Separation Orders) found on the AF Portal > ARMS-Auto Records Mgt Sys or PRDA-Personnel Records Display. Print for DOR.
- \_\_\_ Current Report on Individual Personnel (RIP) Sheet found on the AF Portal > Virtual MPF > Record Review/Update > View/Print All Pages. Print for DOR.

## PRIVACY ACT STATEMENT -- US AIR FORCE APPLICATION RECORD

**AUTHORITY:** 10 USC Sections 133, 265, 275, 504, 508, 510, 672(d), 678, 837, 1007, 1071 through 1480, 1553, 2105, 2107, 3012, 5031, 8013, 8033, 8496, and 9411; 32 USC 708; 44 USC 3101; and Executive Orders 9397, 10450, and 11652.

**PURPOSE:** To determine your mental, medical, and moral qualifications for entry into the US Air Force. This data is FOR OFFICIAL USE ONLY and will be maintained in strict confidence within the Department of Defense according to Federal law and regulation. If you are accepted and subsequently enter into a component of the Air Force, the information becomes a part of your military personnel records which is used to provide information for personnel management actions. If you are not accepted or do not subsequently enter a component of the Air Force, your records will be destroyed as specified by regulation.

**ROUTINE USES:** This information may be disclosed to the Social Security Administration and the Department of Treasury to establish a record of income; to federal, state, local or foreign law enforcement authorities for investigating or prosecuting a violation or potential violation of law; to federal, state, or local agencies to obtain information concerning hiring or retention of an employee, issuance of a security clearance, letting of a contract, or issuance of a license, grant or other benefit; to a federal agency in response to its request in connection with the hiring or retention of an employee, issuance of a security clearance, reporting of an investigation of an employee, letting of a contract, issuance of a license, grant, or other benefit by the requesting agency to the extent that the information is relevant and necessary to the requesting agency's decision on the matter; to a congressional office in response to their inquiry made at the request of the individual; to the Office of Management and Budget (OMB) in connection with review of private relief legislation as set forth in OMB Circular A19; to foreign law enforcement, security, investigatory, or administrative authorities to comply with requirements of international agreements and arrangements; to state and local taxing authorities in accordance with Treasury Fiscal Requirements Manual Bulletin 7607; to the Office of Personnel Management (OPM) concerning information on pay and leave, benefits, retirement deductions, and other information necessary for OPM to carry out its functions; to NARA for records management functions; and to the Department of Justice for pending or potential litigation.

*Johnny K. Applicant*      April 10, 2012

**DISCLOSURE IS VOLUNTARY:** However, failure to furnish information needed to determine your mental, medical and moral qualifications for entry into the US Air Force will result in a denial of application.

**USAF DRUG AND ALCOHOL ABUSE CERTIFICATE**

(This form is subject to the Privacy Act of 1974, Use AF Form 883)

**SECTION I. DEFINITION OF TERMS**

**ADVERSE ADJUDICATION:** An adverse adjudication (*adult or juvenile*) is a finding, decision, sentence, or judgment, other than unconditionally dropped, dismissed, or acquitted. If the adjudicating authority places a condition or restraint that leads to dismissal, dropped charges, or acquittal, the adjudication is adverse. Suspension of sentence, pardon, not processed, or dismissal after compliance with imposed conditions is adverse adjudication.

**AIR FORCE:** Includes active Air Force, Air Force Reserve, Air National Guard, and Air Force Academy.

**ALCOHOL ABUSE:** Alcohol use confirmed by competent medical authority that the individual is emotionally, mentally, or physically dependent on alcohol.

**NOTE:** When not confirmed by medical authority, self-admitted alcohol use that leads to a person's misconduct or unacceptable behavior; to the impairment of work performance, physical or mental health, financial responsibility or personal relationships; must be reported during the medical examination for determination of alcohol abuse.

**DRUG ABUSE:** The illegal, wrongful, or improper use of marijuana, any narcotic substance, hallucinogens, or any illegal drug.

**ILLEGAL DRUGS:** Any drug or narcotic that is habit forming or has a potential for abuse because of its stimulant, depressant, or hallucinogenic effect. Includes cocaine, crack, hallucinogens, (*to include lysergic acid diethylamide (LSD), phencyclidine (PCP), tetrahydrocannabinol (THC) in non-marijuana form, and others*), opium, morphine, heroin, dilaudid, codeine, Demerol, inhalants (*paint, glue, and others*) amphetamines (*speed*), methamphetamines (*ice*), barbiturates (*downers*), and anabolic steroids.

**MARIJUANA:** The intoxicating products of the hemp plant, to include hashish and all natural derivatives of cannabis sativa.

**SUPPLIER, DISTRIBUTOR or TRAFFICKER:** One who illegally, wrongfully, or improperly delivers any of the drugs defined above to the possession of another. This includes the actual, constructive, or attempted transfer of an item, whether or not an agency relationship exists. This also includes the cultivation or manufacture of any drug described above.

**SECTION II. CERTIFICATION AT TIME OF APPLICATION**

**WARNING: YOU MUST BE TOTALLY HONEST IN COMPLETING THIS FORM.** If you are not currently and are accepted by the Air Force, no punitive action can or will be taken against a civilian applicant as a result of any information you reveal. **HOWEVER, YOU ARE CAUTIONED THAT SHOULD YOU CONCEAL DRUG OR ALCOHOL ABUSE INFORMATION AT THE TIME AND NOT DISCLOSED AFTER YOUR ENTRY INTO THE AIR FORCE, PUNITIVE ACTION MAY BE TAKEN AGAINST YOU BASED UPON THE FALSE INFORMATION YOU HAVE PROVIDED.** Such action includes, but is not limited to, elimination from training, discharge under less than honorable conditions.



INITIAL YES/NO BOXES AS APPLICABLE	YES	NO
I have read and understand the definition of the terms above.	JKA	
Have you ever used or experimented with marijuana? ( <i>Prior marijuana use is not disqualifying for enlistment or appointment, unless you are determined to be a chronic user or psychologically dependent, have been convicted or adversely adjudicated for marijuana involvement. Preservice marijuana use may render you ineligible for certain skills.</i> )	**	JKA
Have you ever experimented with, used, or possessed any illegal drug or narcotic?		JKA
Have you ever been a supplier or distributor of or a trafficker in marijuana, or other illegal drugs or narcotics?		JKA
Have you ever been treated or undergone rehabilitation for drug or alcohol abuse?		JKA
Have you consumed hemp seed oil or any products containing hemp seed oil in the last 45 days?		JKA

**SECTION III. STATEMENTS OF UNDERSTANDING**

	INITIALS
During my medical examination I will be tested and screened for drug and alcohol abuse. I understand that any detection of drug use ( <i>including marijuana</i> ) or alcohol abuse will render me ineligible for the Air Force. I understand I will undergo further drug and alcohol screening after entry in the Air Force, and I may be discharged based on the results of such screening.	JKA
Service in the United States Air Force places me in a position of special trust and responsibility. Drug or alcohol abuse after this date will be considered evidence of my inability to meet the standards of behavior expected of me as a member of the Air Force. Therefore, any drug use ( <i>including marijuana</i> ) or any alcohol abuse as described above, <b>FROM THIS DATE FORWARD</b> , renders me ineligible for the Air Force.	JKA
Drug and alcohol abuse by members of the U.S. Air Force violates Air Force standards of behavior and conduct and will not be tolerated. If I am identified as a drug or alcohol abuser while a member of the Air Force, appropriate disciplinary or administrative action may be taken against me, to include trial by court martial or discharge under less than honorable conditions.	JKA
I understand that certain skill areas in the Air Force cannot be performed by persons who have abused drugs or alcohol. My unit commander will have final approval authority regarding my actual assignment to sensitive skill positions. If I am not acceptable for such duties due to information I have revealed on this form, I will be reassigned to another position in my skill or reclassified into another skill. If it is established that I have used any substance beyond that which I have indicated on this form, I understand my enlistment, commissioning, or appointment may be declared fraudulent and I may be discharged.	JKA

**KNOWING AND UNDERSTANDING ALL THE INFORMATION ABOVE, AND REALIZING THAT THIS DOCUMENT WILL BE USED ONLY TO DETERMINE MY ELIGIBILITY AND RECORD MY CERTIFICATION OF ELIGIBILITY, I HEREBY STATE THAT THE ABOVE INFORMATION AS TO MY PREVIOUS DRUG OR ALCOHOL INVOLVEMENT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.**

DATE 10 Apr 2012	NAME ( <i>Last, First, M.I.</i> ) AND SSN OF APPLICANT Applicant, Johnny K. 111-22-3333	SIGNATURE <i>Johnny K. Applicant</i>
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**WITNESS**

I CERTIFY THE ABOVE INDIVIDUAL SIGNED THIS CERTIFICATE OF HIS/HER OWN FREE WILL

DATE 10 Apr 2012	NAME ( <i>Last, First, M.I.</i> ) AND GRADE OF WITNESS Recruiter, Designated O.	SIGNATURE <i>Designated O. Recruiter</i>
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REMARKS

\*\*If you initialled "Yes" for experimenting with marijuana on page 1 a brief statement is required here. The statement needs to include:

1. How many times you experimented with marijuana
2. When was the last date used
3. Why you stopped

Any marijuana use of 6 or more times will require a waiver.

# EXAMPLE

SECTION IV. RECERTIFICATION AT TIME OF ENLISTMENT, COMMISSIONING, OR APPOINTMENT		INITIALS
I have read and fully understand all the information on this form.		
I hereby state that there has been no change in my status since I originally provided this information on the date on front of this form.		
I hereby certify that I have not used any drug, including marijuana, and that I have not been in any alcohol related abuse incidents, since I originally completed this form.		
DATE	NAME ( <i>Last, First, M.I.</i> ) AND SSN OF APPLICANT	SIGNATURE
<b>WITNESS</b>		
I CERTIFY THE ABOVE INDIVIDUAL SIGNED THIS CERTIFICATE OF HIS/HER OWN FREE WILL		
DATE	NAME ( <i>Last, First, M.I.</i> ) AND GRADE OF WITNESS	SIGNATURE





**YOUR UNIT LETTERHEAD**

123 MILITARY DRIVE  
CITY, ST ZIP

**THIS IS AN EXAMPLE COVER LETTER.  
WE ARE NOT RECOMMENDING YOU USE THIS FORMAT  
IF IT DOES NOT REFLECT YOU.**

Johnny K. Applicant  
123 Apple Drive  
City, ST 12345

DATE

Selection Board  
123 Board Drive  
City, ST 12345

Greetings Selection Board,

As a recent college graduate and a current employee of the U.S. Department of Defense, I am very excited to continue my future working with the ANG as a commissioned officer. I am very impressed with the mission of our organization and more specifically the opportunity available as an officer. I am writing to apply for your officer candidacy program.

**EXAMPLE**

As you can see from my resume, my skills and qualifications would make me an outstanding candidate. I am convinced my skills can make a difference to the ANG team. I am currently employed in the civilian sector as well as am an Air National Guardsman. I am certain my personal attributes and past experiences give me a unique perspective as an officer candidate and I would be honored to continue my Air Force career as such as officer.

Thank you for the opportunity to present myself and for your consideration in choosing me as the next Air National Guard officer. If you need to contact me to discuss my qualifications, please call me at (123) 456-7890 or email me at [johnny.applicant@ang.af.mil](mailto:johnny.applicant@ang.af.mil).

*Johnny K. Applicant*

Johnny K. Applicant  
SSgt, ANG

**PERSONAL DATA**

JOHNNY K. APPLICANT, SSgt, ANG

DOR: 12 Feb 2007

Comm: (123) 456-7890

Clearance: Secret

**THIS IS AN EXAMPLE RESUME.****WE ARE NOT SUGGESTING YOU USE THIS FORMAT  
IF IT DOES NOT REFLECT YOU.****OBJECTIVE/GOALS:**

To obtain and succeed in the position a commissioned officer.

**EMPLOYMENT HISTORY**

- April 2010 – Present     **Military Communications Technician, Air National Guard**  
Prepares military communications near and far to ensure only the best information is used to determine outstanding results. Trains and supervises 8 subordinates in the demanding field of military communications. Coordinates with internal and external customers to debrief military communications.
- Aug 2009 – Present     **Statistician, Military Gizmo Company**  
Creates military gizmos for every component of the military. Supports the field with research and development for the appropriate gizmos that fulfill and complete the military mission. Supervise 2 junior statisticians and a field office.
- Jun 2006 – April 2010     **Airman Duty, Air National Guard**  
Researches and completes reports. Distributes and files internal and external correspondence to identified field units. Enforces internal procedures to ensure local operations run efficiently and concerns are handled at the functional level. Assists Sergeant Duty in compiling and analyzing projects in a highly efficient manner.
- Jun 2006 – Aug 2009     **Inventory Specialist, Generic Company USA**  
Coordinates and distributes \$10,000,000 worth of inventory by using the Special Inventory Protocol (SIP) program.

**EXAMPLE****PROFESSIONAL MILITARY EDUCATION**

19 Aug 2009     USAF NCO Preparatory Course In-Residence, Distinguished Graduate

**SIGNIFICANT AWARDS**

10 Aug 2010     Honor Graduate, USAF Military Communications Technician Course

**PERSONAL INTERESTS**

My wife and two rambunctious children are the joy in my life. I am also completing my Master's degree and am projected to gain that in July 2013.

Found at <https://w20.afpc.randolph.af.mil/afoqtsnet20/DODBanner.aspx>



**AIR FORCE  
PERSONNEL CENTER**

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## Air Force Officer Qualifying Test Scores

### Test Results

This document contains information which must be protected IAW AFI 33-332 and DOD Regulation 5400.11. Privacy Act of 1974, as amended, applies and it is For Official Use Only (FOUO).

Today: JANUARY 25, 2008

### Test Scores of APPLICANT, JOHNNY K.

Test Date	TCO	Form/Version	Pilot	Navigator	Acad Aptitude	Verbal	Quantitative
05 JAN 2008	123	ABCD	44	55	66	77	88

Note: The scores listed above are the only valid scores.

[Check another score](#)

NOTICE: For Security reasons close out all browsers when finished.

# EXAMPLE

This contains information which must be protected IAW AFI 33-332 and DoD Regulation 5400.11; Privacy Act of 1974 as Amended Applies, and it is For Official Use Only (FOUO). It must be protected or privacy act information removed prior to further disclosure.

OFFICIAL TRANSCRIPT  
ISSUED TO STUDENT  
IN SEALED ENVELOPE

TRANSCRIPT

Name: JOHNNY APPLICANT

Social Security No.: 123-45-6789

Student ID No 123456

Date of Birth: June 12, 1984



Degree: Bachelor of Arts

Degree Date:

Class:

Major 1:

Concentration 1:

Minor 1:

Major 2:

Concentration 2:

Minor 2:

EXAMPLE

----- (F2Z) Fall II 2005 (cont.) -----

	Total Earned	Total Applied	Total Grade	Total Pt Hrs	Total Points	Total GPA
ses	6.00	3.00	6.00	3.00	12.00	4.000
cum	107.00	36.00	107.00	36.00	141.00	3.916

----- (U1T) Summer 2006 -----

	Total Earned	Total Applied	Total Grade	Total Pt Hrs	Total Points	Total GPA
ses	3.00	3.00	3.00	3.00	12.00	4.000
cum	119.00	45.00	119.00	45.00	177.00	3.938

----- (F2T) Fall II 2005 -----

Course	Total Earned	Total Applied	Total Grade	Total Pt Hrs	Total Points	Total GPA
CJ313 The Law of Evidence	3.00	3.00	3.00	3.00	12.00	4.000
cum	110.00	39.00	110.00	39.00	153.00	3.923

----- (F1T) Fall I 2006 -----

	Total Earned	Total Applied	Total Grade	Total Pt Hrs	Total Points	Total GPA
ses	3.00	3.00	3.00	3.00	12.00	4.000
cum	112.00	42.00	112.00	42.00	165.00	3.937

----- (S1Z) Spring I 2006 -----

Course	Total Earned	Total Applied	Total Grade	Total Pt Hrs	Total Points	Total GPA
CS219 Programming Fundamentals	3.00	3.00	3.00	3.00	12.00	4.000
cum	113.00	42.00	113.00	42.00	165.00	3.928

----- (F2T) Fall II 2006 -----

	Total Earned	Total Applied	Total Grade	Total Pt Hrs	Total Points	Total GPA
ses	3.00	3.00	3.00	3.00	12.00	4.000
cum	125.00	51.00	125.00	51.00	201.00	3.941

----- (S2Z) Spring II 2006 -----

Course	Total Earned	Total Applied	Total Grade	Total Pt Hrs	Total Points	Total GPA
Transfer from DANTE'S	3.00	0.00	3.00	0.00	0.00	0.000
SO483 The Civil War & Reconstruction	3.00	3.00	3.00	3.00	12.00	4.000
cum	116.00	42.00	116.00	42.00	165.00	3.928

----- (S1T) Spring I 2007 -----

Course	Total Earned	Total Applied	Total Grade	Total Pt Hrs	Total Points	Total GPA
SO302 The Study of the Family	6.00	6.00	6.00	6.00	24.00	4.000
SO315 Minority Group Relations	6.00	6.00	6.00	6.00	24.00	4.000
cum	131.00	57.00	131.00	57.00	225.00	3.947

OFFICIAL TRANSCRIPT  
ISSUED TO STUDENT  
IN SEALED ENVELOPE

TRANSCRIPT

Name:

Social Security No.:  
Date of Birth:

Student ID No.

Degree:  
Major 1:  
Major 2:

Degree Date:  
Concentration 1:  
Concentration 2:

Class:  
Minor 1:  
Minor 2:



----- (S12) Spring I 2007 -----

\*\*\*\*\* TRANSCRIPT TOTALS \*\*\*\*\*

Transfer from DANIES

	Total	Grade	Grade	TRSF	Total	Grade	Grade	GPA
	Earned	Applied	Pt Hrs	Points	Earned	Applied	Pt Hrs	Points
SE495 Drug & Alcohol Abuse	3.00	TR						
SF531 Organizational Behavior	3.00	TR						
S6S30 Human Resource Management	3.00	TR						
<b>Total</b>	<b>9.00</b>	<b>0.00</b>	<b>9.00</b>	<b>0.00</b>	<b>60.00</b>	<b>60.00</b>	<b>60.00</b>	<b>237.00</b>
<b>Earned</b>	<b>9.00</b>	<b>0.00</b>	<b>9.00</b>	<b>0.00</b>	<b>83.00</b>	<b>0.00</b>	<b>83.00</b>	<b>0.00</b>
<b>Applied</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>Pt Hrs</b>	<b>9.00</b>	<b>0.00</b>	<b>9.00</b>	<b>0.00</b>	<b>60.00</b>	<b>60.00</b>	<b>60.00</b>	<b>237.00</b>
<b>Points</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>GPA</b>	<b>0.000</b>	<b>0.000</b>	<b>0.000</b>	<b>0.000</b>	<b>3.950</b>	<b>3.950</b>	<b>3.950</b>	<b>3.950</b>
<b>TOTAL</b>	<b>143.00</b>	<b>57.00</b>	<b>143.00</b>	<b>57.00</b>	<b>143.00</b>	<b>60.00</b>	<b>143.00</b>	<b>237.00</b>

EXAMPLE

----- (U12) Summer 2007 -----

	Total	Grade	Grade	GPA
	Earned	Applied	Pt Hrs	Points
CJ440 Internship in Crim	3.00		3.00	12.00
<b>Total</b>	<b>3.00</b>	<b>3.00</b>	<b>3.00</b>	<b>12.00</b>
<b>Earned</b>	<b>3.00</b>	<b>3.00</b>	<b>3.00</b>	<b>12.00</b>
<b>Applied</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>Pt Hrs</b>	<b>3.00</b>	<b>3.00</b>	<b>3.00</b>	<b>12.00</b>
<b>Points</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>GPA</b>	<b>4.000</b>	<b>4.000</b>	<b>4.000</b>	<b>4.000</b>
<b>TOTAL</b>	<b>143.00</b>	<b>60.00</b>	<b>143.00</b>	<b>237.00</b>

Degree: Bachelor of Science  
Awarded: 07/29/2007  
Major: Crim Justice Admin

- \*Designation of degree and date awarded is required on transcript
- \*No online transcript printouts accepted
- \*All transcripts are required in order to determine qualification of AFSC

----- Accomplishments Thgh 2007 -----

07/29/07 Summa Cum Laude

12/18/04 Dean's List

# Air Force Surgeon General

## ASIMS Web

### Individual Medical Readiness Status

APPLICANT.JOHNNY.K.1234567890

ANG

EMAIL: johnny.applicant@ang.af.mil

#### Action List

(Nothing due)

#### Immunizations

Immunization	Series	Date	Next Due
Hep A	2	2 Oct 1999	
Influenza	13	22 Nov 2011	1 Sep 2012
MMR	1	1 Jan 1985	
Polio	1	1 Mar 1995	
Td	4	12 Jul 2009	12 Jul 2019

**EXAMPLE**

#### Medical Readiness

Overall Status:		Current		Profile		Med Equipment		Other	
PHA	Dental	Labs	Restriction:	No	GMI Required:	No	ANAM Date:		
Current	Current	Current	Ready	Current					
Health Assessment:	27 Apr 2011	Dental Class: 1	Blood Type: O	Restriction: No	Release Date: 1 May 2012				
Interval History:	27 Apr 2011	Dental Date: 28 Feb 2012	RH: Positive						
DD2766 Review and Update:	25 May 2011		Sickle Cell: Negative						
Provider Review/Signature:	25 May 2011		G6PD: Normal		<a href="#">AF469</a>			<a href="#">AF422a</a>	
Last In-Person Visit:	-		HIV Date: 24 May 2011						
			DNA: On File						

ENSURE YOU ARE CURRENT

#### Deployment Health Assessments

Form	Form Date	Deploy Date	Return Date	Closed Date
No deployment health assessment forms.				

For More Information Contact

**Fitness Management System**

Report of Individual Fitness for: SSG JOHNNY APPLICANT

[Click here to print](#)

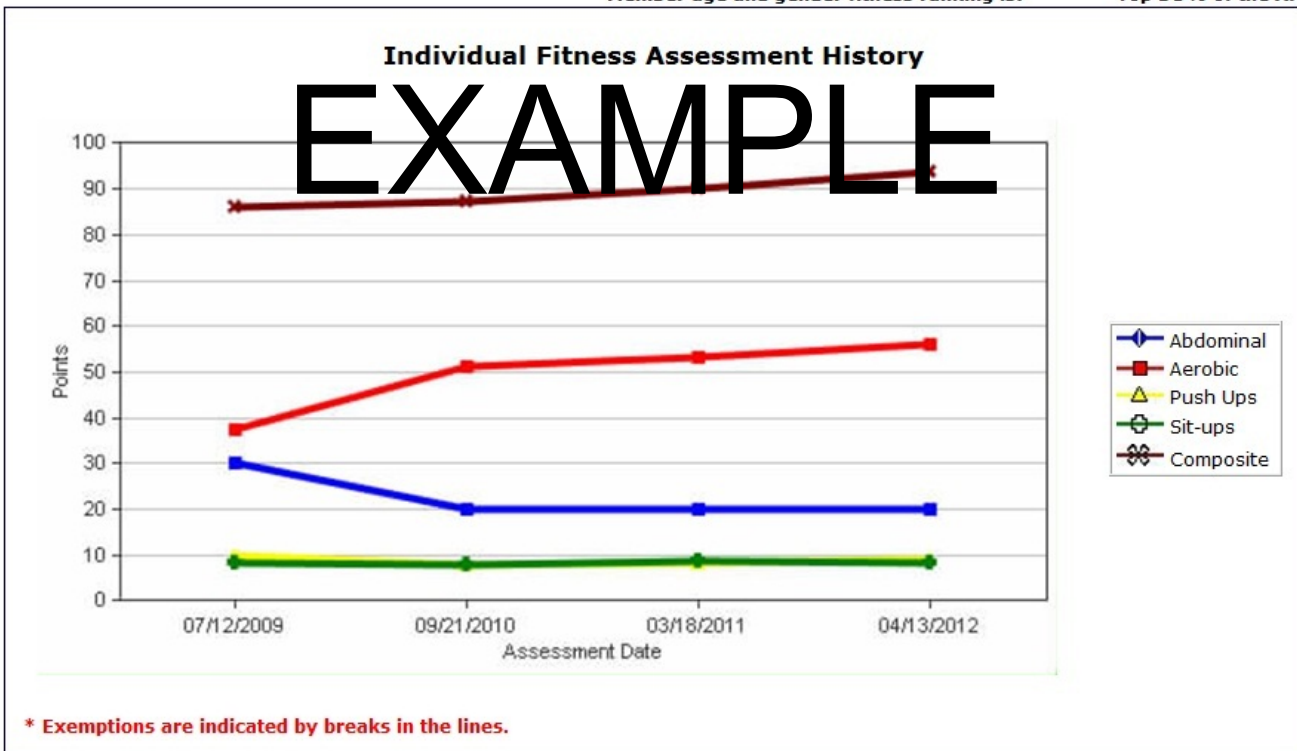
SSAN: XXX-XX-6789

ANG READINESS

Pascode: AB1CDE2 Prepared on: 04/27/2012 at 12:06 GMT

Age	Gender	Height	Weight	BM
27	M	72"	190.0 lbs	11 kg/m
		Score	Points	Max Points
1.5 Mile Run		35	56.00	60.00
Abdominal Circumference		30"	20.00	20.00
Push Ups		45	9.20	10.00
Sit-ups		44	8.50	10.00
Test entered/changed by: FACILITATOR			<b>Total Points</b>	<b>93.7</b>
<b>Exemption Type:</b>		Next test due date: 04/30.2013	<b>Fitness Level</b>	<b>Excellent</b>

Member Air Force fitness ranking is: Top 50% of the AF  
 Member age and gender fitness ranking is: Top 50% of the AF



**Individual Test History**

Name: JOHNNY APPLICANT

Rank: SSG Unit: ANG

SSAN: XXX-XX-6789

Test Date	Cardio Results	Abdominal Circumference (in)	Push Ups	Sit-Ups	Composite Score	Fitness Level	Test Entered By
04/13/2012	35/56	30	45	44	93.7	Excellent	FACILITATOR

**CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY**

1. NAME (Last, First, Middle) APPLICANT, JOHNNY K		2. DEPARTMENT, COMPONENT AND BRANCH AIR FORCE--ANGUS		3. SOCIAL SECURITY NUMBER 123 - 45 - 6789	
--	--	---	--	--	--

4a. GRADE, RATE OR RANK SSGT	b. PAY GRADE E-5	5. DATE OF BIRTH (YYYYMMDD) 19840612	6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD) 20160101
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7a. PLACE OF ENTRY INTO ACTIVE DUTY CITY, STATE USA	b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 1234 APPLE DRIVE, CITY, ST 12345
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8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND ANG	b. STATION WHERE SEPARATED CITY, STATE USA
---	---

9. COMMAND TO WHICH TRANSFERRED ANG, STATE	10. SGLI COVERAGE <input type="checkbox"/> NONE AMOUNT: \$400,000
---	--

11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.) XXXXX AFSC 8 MONTHS 2 DAYS	12. RECORD OF SERVICE			
	a. DATE ENTERED AD THIS PERIOD	2008	JUN	11
	b. SEPARATION DATE THIS PERIOD	2008	MAY	10
	c. NET ACTIVE SERVICE THIS PERIOD	07	02	02
	d. TOTAL PRIOR ACTIVE SERVICE	00	00	00
	e. TOTAL PRIOR INACTIVE SERVICE	00	00	00
	f. FOREIGN SERVICE	00	00	00
	g. SEA SERVICE	00	00	00
	h. EFFECTIVE DATE OF PAY GRADE	2004	MAR	06

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) Armed Forces Reserve Medal with 3 'M' Devices with 1 hourglass device.	14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) NONE THIS PERIOD.
--	---

EXAMPLE

15a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM		YES	X	NO
b. HIGH SCHOOL GRADUATE OR EQUIVALENT	X	YES		NO

16. DAYS ACCRUED LEAVE PAID 0	17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION	YES	NO
			X

18. REMARKS  
MEMBER WAS SERVING ON ACTIVE DUTY IN A VOLUNTARY STATUS UNDER TITLE 32 USC 503 12 JUL 06 - 30 JUN 07. Copy 3 to DVA Data.

-----NOTHING FOLLOWS-----

Found on the AF Portal > ARMS-Auto Records Mgt Sys or PRDA- Personnel Records Display

The information contained herein is subject to computer matching within the Department of Defense or with any other affected Federal or non-Federal agency for verification purposes and to determine eligibility for, and/or continued compliance with, the requirements of a Federal benefit program.

19a. MAILING ADDRESS AFTER SEPARATION (Include ZIP Code) 1234 APPLE STREET CITY, STATE 12345	b. NEAREST RELATIVE (Name and address - include ZIP Code) 1235 APPLE STREET CITY, STATE 12345
--	---

20. MEMBER REQUESTS COPY 6 BE SENT TO <u>UT</u> DIRECTOR OF VETERANS AFFAIRS	X	YES		NO
--	---	-----	--	----

21. SIGNATURE OF MEMBER BEING SEPARATED MEMBER NOT AVAILABLE TO SIGN	22. OFFICIAL AUTHORIZED TO SIGN (Typed name, grade, title and signature) PERSONNEL TECHNICIAN, ANG <i>SP8 J. A. [Signature]</i>
---	---

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION RELEASE FROM ACTIVE DUTY	24. CHARACTER OF SERVICE (Include upgrades) HONORABLE
--	--

25. SEPARATION AUTHORITY AFH 10-416	26. SEPARATION CODE T50	27. REENTRY CODE N/A
--	----------------------------	-------------------------

28. NARRATIVE REASON FOR SEPARATION RELEASE DUE TO DEMOBILIZATION
--

29. DATES OF TIME LOST DURING THIS PERIOD NONE	30. MEMBER REQUESTS COPY 4 (Initials) N/A
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PRINT AND INCLUDE ALL PAGES, NOT JUST FIRST PAGE. May be more or less than 8, this is an example.  
Found at AF Portal > Virtual MPF > Record Review/Update > View/Print All Pages.

Personal Information – Print All Pages

Page 1 of 8

NAME: JOHNNY K APPLICANT RANK: SSG SSAN: 123-45-6789 DATE: 24 APR 2012

**INDIVIDUAL INFORMATION**

MARITAL STATUS: MARRIED

PERSONAL EMAIL ADDRESS:  
[JOHNNYAPPLICANT@GMAIL.COM](mailto:JOHNNYAPPLICANT@GMAIL.COM)

DUTY EMAIL ADDRESS:  
[JOHNNYAPPLICANT@ANG.AF.MIL](mailto:JOHNNYAPPLICANT@ANG.AF.MIL)

HOME PHONE: 123-456-7890

HOME ADDRESS:  
1234 APPLE DRIVE  
CITY, ST 12345

MAILING ADDRESS:  
1234 APPLE DRIVE  
CITY, ST 12345

SEX: MALE

RACE: ASIAN, NATIVE HI/PACIFIC ISL

HISPANIC DECLARATION: NOT HISPANIC OR  
LATINO

ETHNIC GROUP: ASIAN

RELIGIOUS PREFERENCE: NO RELIGIOUS PREFERENCE

DATE OF BIRTH: 12 JUN 1984

PLACE OF BIRTH: CALIFORNIA

CITIZENSHIP: BY BIRTH IN UNITED STATES

WEIGHT MANAGEMENT:

EFFECTIVE DATE:  
N/A

UNFAVORABLE INFORMATION FILE: NO UIF

CONTROL ROSTER: NOT ON CONTROL ROSTER

CONSENT TO RELEASE:

**EXAMPLE**

# ANG Officer Application Worksheet

The information herein is for Official Use Only (FOUO) which must be protected under the Privacy Act of 1974 as amended. Unauthorized disclosure or misuse of this Personal Information may result in criminal and/or civil penalties.



Date of Request

AFRISS APP ID

Last Name  First Name  Middle   Full Time Hire

DOB  Email  Phone #  Date ANG Officer Selection

DOR Last Name  DOR First Name  State/ISR  ISR Last Name  ISR First Name

AFOQT Date  Verbal  Aptitude  Quantitative  Pilot  Navigator  **MSC Applicants** GRE  GMAT

**Experience** Category  Program  Paygrade  Current AFSC/MOS/RATE

**Education** Degree Level  Degree Type  Civilian Medical Speciality

**Physical** Date of Physical  Type of Physical  US Citizen

**Waiver Info**  Waiver Required Type  Moral Category Level  Waiver Explanation

<input type="checkbox"/> AFSC Desired	<input type="checkbox"/> Space, Missile, and C2 (13XX)	<input type="checkbox"/> Operations Support (16XX)	<input checked="" type="checkbox"/> Security Forces (31XX)	<input checked="" type="checkbox"/> Force Support (38XX)	<input type="checkbox"/> BioMed Spec (43XX) (Phar, PH)	<input type="checkbox"/> Nurse (46XX)	<input type="checkbox"/> Law (51XX) (JAG)	<input type="checkbox"/> Contracting (64XX)
<input type="checkbox"/> Pilot (11XX)	<input type="checkbox"/> Intelligence (14XX)	<input type="checkbox"/> Cyber Operations (17XX)	<input type="checkbox"/> Civil Engineer (32XX)	<input type="checkbox"/> Health Services (41XX)	<input type="checkbox"/> Physician (44XX)	<input type="checkbox"/> Dental (47XX)	<input type="checkbox"/> Chaplain (52XX)	<input checked="" type="checkbox"/> FM (65XX)
<input type="checkbox"/> Navigator (12XX)	<input type="checkbox"/> Weather (15XX)	<input checked="" type="checkbox"/> Logistics (21XX) (Maintenance)	<input checked="" type="checkbox"/> Public Affairs (35XX)	<input type="checkbox"/> BioMed Clinician (42XX) (Opt, PA)	<input type="checkbox"/> Surgery (45XX) (Aneth, Or tho)	<input type="checkbox"/> Aerospace Medicine (48XX)	<input type="checkbox"/> Scientific (61XX) Dev Eng (62XX)	<input type="checkbox"/> Insp General (87XX)

**Select Desired Location**  ANY LOCATION

<input type="checkbox"/> AK Eielson	<input type="checkbox"/> CO Colorado Springs	<input type="checkbox"/> HI Kekaha	<input type="checkbox"/> MA Otis ANGB	<input type="checkbox"/> NE Lincoln	<input type="checkbox"/> OR Portland	<input type="checkbox"/> TX Beaumont
<input type="checkbox"/> AK Ft Richardson	<input type="checkbox"/> CO Greeley	<input type="checkbox"/> HI Waimea	<input type="checkbox"/> MA Westfield	<input type="checkbox"/> NE Offutt AFB	<input type="checkbox"/> OR Salem	<input type="checkbox"/> TX Dallas
<input type="checkbox"/> AK Anchorage	<input type="checkbox"/> CT East Granby	<input type="checkbox"/> HI Wheeler AAF	<input type="checkbox"/> MD Baltimore	<input type="checkbox"/> NH Pease ANGB	<input type="checkbox"/> OR Warrenton	<input type="checkbox"/> TX Ellington ARB
<input type="checkbox"/> AL Birmingham	<input type="checkbox"/> CT Orange	<input type="checkbox"/> IA Des Moines	<input type="checkbox"/> ME Augusta	<input type="checkbox"/> NJ Atlantic City	<input type="checkbox"/> PA Coraopolis	<input type="checkbox"/> TX Fort Bliss
<input type="checkbox"/> AL Dothan	<input type="checkbox"/> DC Andrews AFB	<input type="checkbox"/> IA Ft Dodge	<input type="checkbox"/> ME Bangor	<input type="checkbox"/> NJ McGuire AFB	<input type="checkbox"/> PA Ft Indiantown	<input type="checkbox"/> TX Fort Worth
<input type="checkbox"/> AL Montgomery	<input type="checkbox"/> DE New Castle	<input type="checkbox"/> IA Iowa City	<input type="checkbox"/> ME Portland	<input type="checkbox"/> NJ McGuire AFB	<input type="checkbox"/> PA Harrisburg	<input type="checkbox"/> TX Garland
<input type="checkbox"/> AR Camp Robinson	<input type="checkbox"/> FL Jacksonville	<input type="checkbox"/> IA Iowa City	<input type="checkbox"/> MI Alpena	<input type="checkbox"/> NV Reno	<input type="checkbox"/> PA Johnstown	<input type="checkbox"/> TX Houston
<input type="checkbox"/> AR Fort Smith	<input type="checkbox"/> FL Macdill AFB	<input type="checkbox"/> ID Boise	<input type="checkbox"/> MI Battle Creek	<input type="checkbox"/> NY Niagara Falls	<input type="checkbox"/> PA Middletown	<input type="checkbox"/> TX La Porte
<input type="checkbox"/> AR Little Rock	<input type="checkbox"/> FL Patrick AFB	<input type="checkbox"/> ID Mountain Home	<input type="checkbox"/> MI Lansing	<input type="checkbox"/> NY Rome	<input type="checkbox"/> PA Pittsburgh	<input type="checkbox"/> TX Lackland
<input type="checkbox"/> AZ Davis Monthan	<input type="checkbox"/> FL Saint Augustine	<input type="checkbox"/> IL Springfield	<input type="checkbox"/> MI Selfridge ANGB	<input type="checkbox"/> NY Schenectady	<input type="checkbox"/> PA State College	<input type="checkbox"/> TX Randolph
<input type="checkbox"/> AZ Phoenix	<input type="checkbox"/> FL Starke	<input type="checkbox"/> IL Peoria	<input type="checkbox"/> MN Duluth	<input type="checkbox"/> NY Stewart AFB	<input type="checkbox"/> PA Willow Grove	<input checked="" type="checkbox"/> UT Salt Lake Gty
<input type="checkbox"/> AZ Tucson	<input type="checkbox"/> FL Tyndall AFB	<input type="checkbox"/> IL Scott AFB	<input type="checkbox"/> MN St Paul	<input type="checkbox"/> NY Syracuse	<input type="checkbox"/> PR Aguadilla	<input type="checkbox"/> VA Langley AFB
<input type="checkbox"/> CA Beale	<input type="checkbox"/> GA Brunswick	<input type="checkbox"/> IN Fort Wayne	<input type="checkbox"/> MO Bridgeton	<input type="checkbox"/> NY West Hampton	<input type="checkbox"/> PR Carolina	<input type="checkbox"/> VA Sandston
<input type="checkbox"/> CA Fresno	<input type="checkbox"/> GA Brunswick	<input type="checkbox"/> IN Terre Haute	<input type="checkbox"/> MO St Joseph	<input type="checkbox"/> OH Cincinnati	<input type="checkbox"/> PR Toa Baja	<input type="checkbox"/> VI Kingshill
<input type="checkbox"/> CA March ARB	<input type="checkbox"/> GA Dobbins AFB	<input type="checkbox"/> IN Indianapolis	<input type="checkbox"/> MO Whiteman AFB	<input type="checkbox"/> OH Columbus	<input type="checkbox"/> RI Coventry	<input type="checkbox"/> VT Burlington
<input type="checkbox"/> CA Moffett Field	<input type="checkbox"/> GA Garden Gty	<input type="checkbox"/> KS Salina	<input type="checkbox"/> MS Gulfport	<input type="checkbox"/> OH Mansfield	<input type="checkbox"/> RI N Smithfield	<input type="checkbox"/> WA Camp Murray
<input type="checkbox"/> CA North Highlands	<input type="checkbox"/> GA Marietta	<input type="checkbox"/> KS Topeka	<input type="checkbox"/> MS Meridian	<input type="checkbox"/> OH Port Clinton	<input type="checkbox"/> RI Quonset	<input checked="" type="checkbox"/> WA Fairchild AFB
<input type="checkbox"/> CA Port Hueneme	<input type="checkbox"/> GA Robins AFB	<input type="checkbox"/> KS Wichita	<input type="checkbox"/> MS Jackson	<input type="checkbox"/> OH Springfield	<input type="checkbox"/> SC McEntire ANG	<input type="checkbox"/> WI Madison
<input type="checkbox"/> CA Sacramento	<input type="checkbox"/> GA Savannah	<input type="checkbox"/> KY Louisville	<input type="checkbox"/> MT Great Falls	<input type="checkbox"/> OH Swanton	<input type="checkbox"/> SD Sioux Falls	<input type="checkbox"/> WI Milwaukee
<input checked="" type="checkbox"/> CA San Diego	<input checked="" type="checkbox"/> HI Hickam AFB	<input type="checkbox"/> LA Alexandria	<input type="checkbox"/> MT Helena	<input type="checkbox"/> OH Zanesville	<input type="checkbox"/> TN Chattanooga	<input type="checkbox"/> WI Volk Field
<input type="checkbox"/> CA Van Nuys	<input type="checkbox"/> HI Kahului	<input type="checkbox"/> LA Hammond	<input type="checkbox"/> MT Malmstrom AFB	<input type="checkbox"/> OK Ft Sill	<input type="checkbox"/> TN McGhee Tyson	<input type="checkbox"/> WV Charleston
<input type="checkbox"/> CA Vandenberg AFB	<input type="checkbox"/> HI Kapolei	<input type="checkbox"/> LA New Orleans	<input type="checkbox"/> NC Charlotte	<input type="checkbox"/> OK Oklahoma City	<input type="checkbox"/> TN Memphis	<input type="checkbox"/> WV Martinsburg
<input type="checkbox"/> CO Buckley AFB	<input type="checkbox"/> HI Kapolei	<input type="checkbox"/> LA Pineville	<input type="checkbox"/> NC New London	<input type="checkbox"/> OK Tulsa	<input type="checkbox"/> TN Nashville	<input type="checkbox"/> WY Cheyenne
		<input type="checkbox"/> MA Milford	<input type="checkbox"/> ND Fargo	<input type="checkbox"/> OR Klamath Falls	<input type="checkbox"/> TX Austin	



## ANG Officer Application Statement of Understanding

Applicant  
Initials

<p>I, <input type="text" value="Johnny K. Applicant"/> , understand that I am applying for a traditional, part-time officer position in the Air National Guard (ANG), and that application does not guarantee selection as an officer. Upon arrival of my application, my information will become available to the unit(s) that I have selected, and selection is accomplished at the unit level based on vacancies. I understand that the list of units I selected on the Worksheet will have access to my application upon approval, and I concur with this list. Selection at the unit level may include additional pre-qualification paperwork as well as possible interview(s) as the unit requires. I also understand that the full-time application process is separate from this application.</p>	JKA
<p>If selected, I understand that I will be required to complete the application process with the Designated Officer Recruiter (DOR) for the unit/state of selection. This application is only a pre-qualification, and I understand that final approval will be made after a complete application is submitted to NGB/AIPOP through the DOR. I also understand that my initial medical determination is only a pre-qualification, and that I will still have to complete the medical processing, and during this time I could be found medically disqualified. I understand that if I am medically disqualified, that waivers are case by case, and are not guaranteed.</p>	JKA
<p>I understand that my application will expire 24 months from the date of submission and that several forms may have expired and will need to be accomplished again upon selection. I also understand that it is my responsibility to communicate my intention to renew my application with the DOR. In addition, I understand that once my application is pre-qualified and I am waiting for unit selection that it is my responsibility to communicate with the DOR any new law violations, changes in medical status, and changes of intention to become an officer in the ANG.</p>	JKA
<p>I understand that travel pay is not authorized for inactive training which includes drill weekends, and I have considered this when making my unit selections.</p>	JKA

Applicant Name

Applicant Signature

*Johnny K. Applicant*

Date

DOR/ISR Name and Rank

DOR/ISR Signature

*Designated O. Recruiter*

Date

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