

MCWT-CSD

SUBJECT: WARRIOR TRANSITION UNIT NON-MEDICAL ATTENDANTS

MEMORANDUM FOR Commander, WTU (write in unit specific information)

THRU Commander, XX Company, WTU

SUBJECT: Request for Non-Medical Attendant (NMA) Orders

1. Request for the assignment of a Non-Medical Attendant (NMA) for the following Soldier: _____.

(Last Name, First Name, last 4 SSNs)

2. The Soldier's medical condition is considered (check box):

- Very Seriously Ill
- Seriously Ill

3. The Soldier will need assistance with the following (check any that apply):

- Cognitive Guidance/Direction
- Emotional Stability
- Physical Domain
- Spiritual Domain

4. Based upon the medical determination, the Soldier will need a NMA for approximately (check one):

- 180 days
- 90 days
- 30 days
- Renewal Orders for (circle one): 30 days 90 days
- Renewal Orders for specified time of: _____.
- No longer has the medical need for a NMA.

5. The POC is the Soldier's PCM who may be reached at : _____.

(list phone number)

PCM signature block