

PERSONNEL ACTION

For use of this form, see AR 600-8-6 and DA PAM 600-8-21; the 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.

1. THRU (Include ZIP Code)

2. TO (Include ZIP Code)

HQ, USAREC
 ATTN: RCRO-P-PL (HRAP Manager)
 Fort Knox, KY 40121

3. FROM (Include ZIP Code)

Commander
 1st Bn, 81st Armor Bn
 Fort Knox, KY 40121

SECTION I - PERSONAL IDENTIFICATION4. NAME (Last, First, MI)
JENSEN, WALTER5. GRADE OR RANK/PMOS/IAOC
SPC, 19K106. SOCIAL SECURITY NUMBER
111-22-3333**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)

Service School (End only)	Special Forces Training/Assignment	Identification Card
ROTC or Reserve Component Duty	On-the-Job Training (End only)	Identification Tags
Volunteering For Oversea Service	Retesting in Army Personnel Tests	Separate Rations
Ranger Training	Reassignment Married Army Couples	Leave - Excess/Advance/Outside CONUS
Reassignment Extreme Family Problems	Reclassification	Change of Name/SSN/DOB
Exchange Reassignment (End only)	Officer Candidate School	Other (Specify) S-RAP
Airborne Training	Asgmt of Pers with Exceptional Family Members	

9. SIGNATURE OF SOLDIER (When required)
/signed/10. DATE (YYYYMMDD)
20041001**SECTION IV - REMARKS (Applies to Sections II, III, and V) (Continue on separate sheet)**

Request for participation in the Special Recruiter Assistance Program (S-RAP).

CURRENT UNIT ASSIGNMENT (INCLUDE INSTALLATION): A Co, 1st Bn., 81st Armor Bn, Fort Knox 40121

CURRENT UNIT PERSONEL SECTION E-MAIL ADDRESS: _____

DUTY PHONE NO: (502) 624-1010 FAX PHONE NO: (502) 624-1009E-MAIL ADDRESS: WALTER.JENSEN@US.ARMY.MILDATES REQUESTED FOR S-RAP TDY: FROM: 10 NOV 04 TO: 24 NOV 04NAME OF RECRUITING STATION AND ADDRESS FOR S-RAP DUTY: NORTH LITTLE ROCK RECRUITING STATION, 4194 E MCCAIN BLVD, LITTLE ROCK, AR 72117 PHONE NO: (501) 945-1619MODE OF TRANSPORTATION (CIRCLE ONE): AIR POVGOV'T CHARGE CARD (CIRCLE ONE): YES NO**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

12. COMMANDER/AUTHORIZED REPRESENTATIVE

WILLIE B WRIGHT, LTC, AR, Commanding

13. SIGNATURE

/signed/

14. DATE (YYYYMMDD)

20041002