

CADET PERSONNEL ACTION REQUEST

I.	UNIT NUMBER	INSTITUTION WHERE UNIT IS LOCATED	INSTITUTION CADET ATTENDS	UNIT TELEPHONE NUMBER	DATE SUBMITTED
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II. PERSONAL DATA

1. NAME (Last, First, Middle Initial)	2. EMPLOYEE ID	3. DATE OF BIRTH	4. GENDER <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	5. INSTITUTIONAL SYSTEM <input type="checkbox"/> QUARTER <input type="checkbox"/> SEMESTER
SSN				

6. TYPE PROGRAM <input type="checkbox"/> 1-YEAR <input type="checkbox"/> 2-YEAR <input type="checkbox"/> 4-YEAR	7. DATE OF POC ENTRY	8. DATE OF ENLISTMENT	9. CURRENT DOG/DOC DOG _____ DOC _____
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10. AFOQT					11. AS YEAR	12. CATEGORY (CURRENT)	13. MEMBERSHIP STATUS			
AA	P	N	V	Q			<input type="checkbox"/> GMC	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> PURSUING	<input type="checkbox"/> PNA
							<input type="checkbox"/> POC	<input type="checkbox"/> COMPLETED	<input type="checkbox"/> APPLICANT	

14. SCHOLARSHIP STATUS: <input type="checkbox"/> NONE <input type="checkbox"/> DESIGNEE <input type="checkbox"/> ACTIVE	15. ACADEMIC MAJOR WITH CODE (current)	16. CREDIT HOURS	
TYPE _____	MAJOR: _____	A. FULL TIME	B. CURRENT
LENGTH _____	CODE: _____		
SOURCE _____	18. ACADEMIC STANDING (A = 4.0)		
<input type="checkbox"/> TEMP INACTIVATED (date) _____	START OF TERM _____ END OF TERM _____		
<input type="checkbox"/> SUSPENDED (date) _____	FOR GOOD ACADEMIC STANDING TERM _____ CUM _____ GRAD _____		
<input type="checkbox"/> TERMINATED (date) _____	CADET'S LAST TERM TERM _____ CUM _____		

17. FIELD TRAINING	19. CURRENT OR PRIOR SERVICE		
ATTENDED/PROJECTED (date) _____	A. BRANCH OF SERVICE	D. YEARS REMAINING ON ENLISTMENT	
DEFERRED (date) _____	B. FROM (yr/mo) _____	C. TO (yr/mo) _____	
20. MEDICALLY CERTIFIED			
A. CURRENT CATEGORY <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> MEDICAL RECHECK			
B. REQUESTED CATEGORY <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> PENDING			

21. CONDITIONAL EVENTS (For Additional Space Use Block 24)		
NUMBER OF CONDITIONALS	DATE	REASON

III. REQUEST(S)				
22. SPECIFIC REQUEST(S):				
23. PROJECTED DATA (As Applicable)				
MAJOR	CODE	DOC	DOG	CATEGORY
24. SPECIFIC JUSTIFICATION PERTAINING TO REQUEST (S)				

25. ATTACHMENTS
- A. REQUIRED
1. Transcript(s)
 2. Weight/Fitness Report
 3. AFROTC Form 708
- B. DISENROLLMENT
1. DD Form 785
 2. Disenrollment Package (Ref AFROTCI 36-2011, Figure 6.2)
- C. AS REQUIRED
1. AFROTC IMT 35 / Affidavit(s)
 2. Corroboration
 3. Counseling Records
 4. Institution Documentation
 5. Previous HQ AFROTC Correspondence
 6. Cadet Statement(s)
 7. DD Form 214
 8. DD Form 785
 9. AF IMT 2030
 10. SF 88/DD Form 2351
 11. AFROTC IMT 48 or equivalent
- D. OTHER

26. NAME AND GRADE OF UNIT COMMANDER	SIGNATURE OF UNIT COMMANDER

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About the ITAOP/savePDF Method

The traditional Field-by-Field creation process is extremely ineffective and slow.

The only realistic option to create high-quality forms is the Insert-Text-Anywhere-on-Page (ITAOP) method.

The field creation process is about 10,000 times faster than the traditional method; the list of ITAOP features is not even available for the traditional method.

ITAOP savePDF method proved to be very simple and completely reliable for millions of users all over the world (incl. individuals, companies, organizations, government employees).

ITEM 24 (CONTINUED) DATE RECEIVED

Empty rectangular area for item 24 details.

IV. HQ AFROTC USE ONLY

27. REMARKS

RRFP ACTION

V. FOR THE COMMANDANT

28. DISPOSITION OF REQUEST(S)

APPROVED DISAPPROVED SEE REMARKS ABOVE SEE ATTACHED LETTER DATE DISPATCHED _____

NAME AND GRADE OF REVIEWING OFFICIAL	SIGNATURE OF REVIEWING OFFICIAL	ALLOCATION AWARDED DATE _____ FY _____ CATEGORY _____ <input type="checkbox"/> CSP CONTINUATION AUTH
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