

PERSONNEL SCREENING AND EVALUATION RECORD

For use of this form, see AR 50-5 and AR 50-6; the proponent agency is Provost Marshall General (PMG).

PRIVACY ACT STATEMENT OF 1974

AUTHORITY: Internal Security Act of 1950 (*Pub L. 81-831*), 5 U.S.C., 301, 10 U.S.C., 3013, E.O. 9397 and records will be maintained under file #640-10b and 690-200a.

PRINCIPAL PURPOSE: To evaluate the qualifications and suitability of an individual for assignment to certain sensitive duties under the nuclear/chemical personnel reliability program.

ROUTINE USES: The "Blanket Routine Uses" set forth at the beginning of the Army's compilation of systems of records notices also apply to this system.

DISCLOSURE: Voluntary. However, failure to provide all or part of the requested information may result in nonselection for duties under the personnel reliability program.

A. NAME OF INDIVIDUAL (<i>Last, First, MI</i>)	B. GRADE	C. SSN
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PART I - INITIAL INTERVIEW

A. The interview required by AR 50-5/50-6 has been conducted by the certifying official or designated representative.
 Screen per AR 50-5 AR 50-6

B. NAME OF INTERVIEWER	C. GRADE	D. SIGNATURE	E. DATE (YYYYMMDD)
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PART II - PERSONNEL RECORDS SCREENING

A. Personnel records have been reviewed per AR 50-5/50-6. Information that may preclude assignment to the PRP is is not attached.
 This individual has Personal Security Investigation (PSI) completed on _____ based on a ENTNAC, NACI
DATE (YYYYMMDD)

NACL, ACCESS NACIC SSBI. This individual has been issued a security clearance of Confidential Secret
 Top Secret or this individual does not have a clearance.

B. NAME OF SCREENING OFFICIAL	C. GRADE	D. SIGNATURE	E. DATE (YYYYMMDD)
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PART III - MEDICAL RECORDS SCREENING

A. Medical records have been reviewed per AR 50-5/50-6. Information that may preclude assignment to the PRP is is not attached.

B. NAME OF SCREENING OFFICIAL	C. GRADE	D. SIGNATURE	E. DATE (YYYYMMDD)
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PART IV - DENTAL RECORDS SCREENING

A. Dental records have been reviewed per AR 50-5/50-6. Information that may preclude assignment to the PRP is is not attached.

B. NAME OF SCREENING OFFICIAL	C. GRADE	D. SIGNATURE	E. DATE (YYYYMMDD)
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PART V - CERTIFYING OFFICIAL'S EVALUATION

A. Individual has been screened per AR 50-5/50-6. After thorough review of information provided, I find this individual suitable
 unsuitable for the PRP. (*AR 600-37 complied with.*)

B. NAME AND ORGANIZATION OF CERTIFYING OFFICIAL	C. GRADE	D. SIGNATURE	E. DATE (YYYYMMDD)
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PART VI - CONTINUING EVALUATION/ASSIGNMENT BRIEFING

A. This individual is to be placed under continuing evaluation per AR 50-5/50-6. I have briefed this individual per AR 50-5/50-6 for
 training/levy or assignment to a nuclear duty position. chemical duty position.

B. ORGANIZATION	C. INDIVIDUAL'S SIGNATURE	D. CERTIFYING OFFICIAL'S SIGNATURE	E. DATE (YYYYMMDD)

PART VII - TEMPORARY DISQUALIFICATION	PART VIII - ADMINISTRATIVE TERMINATION
THIS INDIVIDUAL WAS TEMPORARILY DISQUALIFIED ON (YYYYMMDD)	INDIVIDUAL'S PRP STATUS ADMINISTRATIVELY TERMINATED ON (YYYYMMDD)

PART IX - PERMANENT DISQUALIFICATION *(This Section To Be Completed Only Upon Permanent Disqualification.)*

A. Status at time of disqualification	B. Reason for permanent disqualification
<input type="checkbox"/> 1. Being screened for PRP. <input type="checkbox"/> 2. Attending Service school or training. <input type="checkbox"/> 3. Assigned to <input type="checkbox"/> a. critical nuclear duty position. <input type="checkbox"/> b. controlled nuclear duty position. <input type="checkbox"/> c. chemical duty position.	<input type="checkbox"/> 1. Alcohol abuse. <input type="checkbox"/> 2. Drug abuse. Type used <input type="checkbox"/> Narcotics <input type="checkbox"/> Depressants <input type="checkbox"/> Stimulant <input type="checkbox"/> Cannabi <input type="checkbox"/> Hallucinogen <input type="checkbox"/> 3. Negligence/delinquency in duty performance. <input type="checkbox"/> 4. Court-martial/civilian convictions. <input type="checkbox"/> 5. Physical/mental condition. <input type="checkbox"/> 6. Poor attitude/lack of motivation. <input type="checkbox"/> 7. Other

			G. DATE (YYYYMMDD)
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