



REPORT OF INSPECTION FOR FEDERAL RECOGNITION

DEPARTMENT OF THE ARMY AND THE AIR FORCE  
NATIONAL GUARD BUREAU

(For use of this form, see ANGI 90-201; the proponent agency is ANG/XP)

1. Unit Designation	2. Location	3. PAS Code
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I ORGANIZATION

4. Is this unit Organized as shown on UMD? \_\_\_ Yes \_\_\_ No  
 5. Is the attitude of the community favorable towards this organization? \_\_\_ Yes \_\_\_ No

II PERSONNEL

6. What percentage of assigned officers are federally recognized? \_\_\_ of \_\_\_ = \_\_\_ %  
 7. How many officers are awaiting federal recognition but are otherwise qualified? \_\_\_  
 8. Does each assigned member have a personnel record? \_\_\_ Yes \_\_\_ No Where filed: \_\_\_ On-hand \_\_\_ Location  
 9. Does each assigned member have a medical record? \_\_\_ Yes \_\_\_ No Where filed: \_\_\_ On-hand \_\_\_ Location  
 10. Are all personnel physically/medically qualified IAW AFI 48-123? \_\_\_ Yes \_\_\_ No  
 11. Do officers meet eligibility requirements to occupy UMD positions to which assigned IAW AF Manual 36-2105? \_\_\_ Yes \_\_\_ No  
 12. Do airmen meet eligibility requirements to occupy UMD positions to which assigned IAW AF Manual 36-2108? \_\_\_ Yes \_\_\_ No  
 13. Has the oath of enlistment been administered to all airmen as required by the DD Form 4? \_\_\_ Yes \_\_\_ No
- |               |                |          |                    |
|---------------|----------------|----------|--------------------|
| 14. STRENGTH: | UMD Authorized | Assigned | Minimum # Required |
| a. OFFICERS   | _____          | _____    | _____              |
| b. ENLISTED   | _____          | _____    | _____              |
| c. AGGREGATE  | _____          | _____    | _____              |

III FACILITIES

15. The facilities are owned by: Federal \_\_\_ State \_\_\_ County \_\_\_ City \_\_\_ Unit \_\_\_ Private \_\_\_  
 16. Are the assigned available facilities adequate for this and other units on base? \_\_\_ Yes \_\_\_ No  
 17. Do the facilities provide the minimum security as prescribed by UFC 4-101-01 and AFI 31-101? \_\_\_ Yes \_\_\_ No  
 18. Has the Vulnerability Assessment been accomplished IAW AFI 10-245? \_\_\_ Yes \_\_\_ No  
 19. Has the facility passed an environmental assessment IAW NEPA? \_\_\_ Yes \_\_\_ No  
 20. Are the operating ramps, taxiways, runways available and adequate for the assigned UE and PAA aircraft? \_\_\_ Yes \_\_\_ No  
 21. Are facilities adequate for the storage and protection of United States Property against fire, elements, and pilferage? \_\_\_ Yes \_\_\_ No  
 22. Are there proper facilities available for safeguarding classified equipment and materials? \_\_\_ Yes \_\_\_ No  
 23. Are the available facilities adequate to house or provisions made to provide for the support services necessary to the administration and logistical support of the units located at this facility? \_\_\_ Yes \_\_\_ No  
 24. Are accommodations available for personnel desiring or required to remain overnight during weekend training assemblies? \_\_\_ Yes \_\_\_ No  
 25. In the event answers #16 through #24 above are "No", explain the impact on training readiness of the unit and any plans to remedy the deficiency in facilities.

IV RECOMMENDATIONS

26. Recommendations by inspection team/officer: Based on the facts as presented and the personal evaluation made by the inspecting team/officer, it is recommended that:  
 a. Federal recognition \_\_\_ BE \_\_\_ NOT BE granted to this unit.  
 b. Effective date of federal recognition \_\_\_\_\_  
 c. That sensitive items of property \_\_\_ BE \_\_\_ NOT BE granted this unit.

\_\_\_\_\_  
TYPED NAME AND RANK OF  
SENIOR INSPECTING OFFICER

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
UNIT OF ASSIGNMENT

V MAJOR AIR COMMAND APPROVAL

27. Recommendations by gaining Major Command Commander:  
 a. Approved \_\_\_\_\_ Disapproved \_\_\_\_\_ b. Date \_\_\_\_\_  
 c. Signature \_\_\_\_\_ d. Headquarters \_\_\_\_\_