

NOTIFICATION OF EXPIRATION OF ACTIVE OBLIGATED SERVICE (EAOS)

(Date)

MEMORANDUM

From: Officer in Charge, U.S. Navy Personnel Support Activity
Detachment, _____

To: _____

Via: Command Career Counselor, _____

Subj: NOTIFICATION OF EXPIRATION OF ACTIVE OBLIGATED SERVICE (EAOS)

Ref: (a) EDVR for UIC _____ dated _____

1. Review of reference (a) indicates your EAOS is _____.
2. You are requested to complete the lower portion of this form and return it to this detachment no later than _____ to prevent disruptions in your pay allowances and to allow the detachment to monitor your intentions.

By direction

(Date)

MEMORANDUM

From: _____

To: Officer in Charge, U.S. Navy Personnel Support Activity
Detachment, _____

Via: Command Career Counselor, _____

Subj: NOTIFICATION OF EXPIRATION OF ACTIVE OBLIGATED SERVICE (EAOS)

1. I desire to:

- () Reenlist on _____ for _____ years.
- () Extend my enlistment duty for _____ months. (USNR ONLY)
- () Extend my active duty service for _____ months. (USNR ONLY)
- () Extend my reserve enlistment for _____ months to cover my requested extension of active duty service. (USNR ONLY)
- () Separation/Discharge at EAOS.

2. I have submitted the applicable request chit(s) and understand that I must have a completed physical examination before I can reenlist or extend my enlistment for greater than 24 months or transfer for separation.