

NAME/SSN:

RANK:

MOS:

HM ADDRESS:

(Street)

Arrival Date:

Gaining BN:

(City)

(ST)

(Zip)

EMPLOYER:

SUPERVISOR:

EMP. ADDRESS:

(Street)

(City)

(ST)

(Zip)

HOME PHONE:

WORK PHONE:

SPONSOR:

SPONSOR PH:

FOLLOWING WILL BE COMPLETED BY STAFF SECTIONS ONLY

201 FILE:

S-1 Representative:

PRINTED NAME

SIGNATURE

DATE

SGLV YES / NO

DD 93 YES / NO

DOG TAGS (2 Sets) YES / NO

EMILPO Transaction complete YES / NO

FAMILY READINESS YES / NO

SOCIAL ROSTER YES / NO

AKO ACCOUNT YES / NO

DA FORM 31 YES / NO

BARRACKS ASSIGNMENT YES / NO

MEAL CARD ISSUED YES / NO

COPY OF LAST EVALUATION YES / NO

(To include AER)

ADJUTANT: _____
BDE CDR'S/CSM WELCOME
BDE CDR'S PT (MSG UP)

AKO Address _____

DATE OF LAST EVAL _____

BN FRSA

FRG Leader Intial: _____

FRG Leader ID'd/Contact Information Provided YES / NO

BN Chaplain Intial: _____

IRIS UPDATED: YES / NO

Welcome letter sent to spouse and parent: YES / NO

Date of Chaplain Visit: _____

S2 EPSQ:

EPSQ Representative:

PRINTED NAME

SIGNATURE

DATE

SECURITY CLEARANCE _____

DATE OBTAINED: _____

EPSQ REQUIRED YES / NO

SEC. CLEARANCE REQUIRED: _____

ANTI-TERRORISM CERTIFICATE: YES/NO

ISOPREP VERIFICATION: Completion date: _____

Actions Required: _____

(S3) TRAINING / 1SG

S-3 Representative: _____

PRINTED NAME

SIGNATURE

DATE

Individual Training Rec.

YES / NO

HT: _____ WT: _____

Weight Control

YES / NO

(date)

Range Cert. (NCO and Above)

YES / NO

APFT Card

YES / NO

APFT Date: _____

Jump Log Opened

YES / NO/N/A

Basic Airborne Refresher (BAR) date: _____

School NCO

Initials: _____

Mil Driver's License

YES / NO

NVG Qualified: (yes / no)

Profile (Provide Copy)

YES / NO

NA / Temp / Perm Exp. Date: _____

(Circle one)

S4 (SUPPLY)

S-4 Representative: _____

PRINTED NAME

SIGNATURE

DATE

TURN IN CLOTHING RECORD

YES / NO

CIF/EQUIPMENT ISSUE: YES NO

OCIE ISSUED

YES / NO

GOV Travel Charge Card YES

HAND RECEIPT

YES / NO

DTS: Attach to BN Hierachy

REMARKS: (include items unavailable to be issued)

Barracks Assignment: Building Number/Room Number- _____ / _____

BDE S4

Room mate:

Gov Credit Card

YES NO

RETENTION NCO

RETENTION NCO: _____

Date: _____

Initials: _____

S6

IASO NCO: _____

Date: _____

Initials: _____

BRIEFINGS / INTRODUCTIONS/COUNSELING PACKET

FIRST SERGEANT

Date: _____ Initials: _____

HHC/HHT/HHB CDR

Date: _____ Initials: _____

BATTALION CSM

Date: _____ Initials: _____

BATTALION COMMANDER

Date: _____ Initials: _____