

AIR FORCE ENLISTED GUIDE



TO BECOME AN OFFICER IN THE AIR NATIONAL GUARD



NATIONAL GUARD BUREAU

3500 FETCHET AVENUE
ANDREWS AFB MD 20762-5157

12 April 2012

MEMORANDUM FOR PROSPECTIVE OFFICER APPLICANT

FROM: Angela J. Petri, SMSgt, USAF

SUBJECT: Officer Application Process

Dear Prospective Officer Applicant,

Congratulations on your desire to become an officer in the Air National Guard (ANG). You have worked very hard to achieve your educational goals. The ANG is always looking for strong individuals to fill future leadership roles.

The ANG is excited to have a new application process for officer applicants. This process is customer focused with a clear path to apply through your local ANG Designated Officer Recruiter (DOR) assigned to the Recruiting and Retention team. This new approach allows you to select which ANG units you are willing to travel to and interested in joining. Upon prequalification at the National Guard Bureau (NGB), your application will be catalogued into a system that allows units to select from and will remain in the system for up to 24 months. This system highlights interest by applicant, position and location.

The attached guide was developed to help you and your DOR with all the required paperwork for the application. Please use the provided checklist and guide when accomplishing your application. Please ensure all checklist items are complete prior to submitting the application to your DOR.

If you have any questions regarding this new application process, please contact your local ANG DOR. Thank you again for your interest and good luck achieving your goal of becoming an officer in the ANG.

A handwritten signature in purple ink that reads "Angela J. Petri".

ANGELA J. PETRI, SMSgt, USAF
Superintendent, ANG Officer Recruiting

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BASIC PREQUALIFICATION STANDARDS FOR ANG OFFICER APPLICATION

AGE

- Maximum age for initial non-rated (non flying) line applicants must be commissioned prior to their 35th Birthday. Exception to Policy (ETP) for nonrated can be requested with applicants with prior service if applicant is commissioned prior to 40th birthday.
- Undergraduate Flying Training (UPT) and Undergraduate Navigator Training (UNT) applicants must be less than 30 years old prior to entering into formal UFT/UNT training and EPTs are only approved under very rare circumstances for exceptionally qualified applicants.
- Maximum age for initial appointment in health professional specialty is less than 47 years, and ETPs can be submitted for specialties with a critical manning need.
- Maximum age for Judge Advocate General (JAG) appointment is 34, and 37 is the maximum age for ETP.
- Maximum age for Chaplain is less than 40 years for Non-Prior Service (NPS), and 42 with two years satisfactory prior service. ETPs can be submitted for hard to fill Chaplain Specialties such as Catholic Chaplains. (Reference is ANGI 36-2005 Chapter 3)

OFFICER TESTING

All Line officers require the Armed Forces Qualification Test (AFOQT). If you haven't taken the AFOQT, talk with your Base Education Training Office or DOR. Ensure that you are prepared for the test since applicants are only allowed to test twice in a lifetime. Wait period for retest is 180 days (Reference AFI 36-2605). Below are minimum AFOQT scores:

Category	Verb	Quant	Pilot	Nav	Total <-- TOTAL PILOT and NAV SCORE Must be 50 or more
UPT	15	10	25	10	50
UNT	15	10	10	25	50
LINE	15	10	N/A	N/A	N/A

(Reference is ANGI 36-2005 Table 3.4)

Graduate Record Exam (GRE) or Graduate Management Admission Test (GMAT) is required for the 41AX, Health Service Mgt, AFSC. GRE: 800, GMAT: 400 (Reference is ANG/SG MSC guidance)

AFSC QUALIFICATION

Qualifications for specific AFSCs can be found in the Air Force Officer Classification Directory (AFOCD). This publication is updated at least every six months and can be found on the Air Force Personnel Services website:

<https://gum-crm.csd.disa.mil> (type AFOCD in search field for most current directory)

The following AFSCs have specific education requirements: 13XX (Space/Missile), 15XX (Weather), 17XX (Cyber Ops), 32XX (Civil Engineer), 41XX (Health Services), 42XX (Biomed), 44XX (Physician), 45XX (Surgery), 46XX (Nurse), 47XX (Dental), 48XX (Aerospace Med), 51XX (JAG), 52XX (Chaplain), 61XX (Scientific), 62XX (Dev Eng), 64XX (Contracting), 65XX (Finance)

MORALS

Officers are held to high moral standards to include law violations and drug usage. Any applicant that has experimented with marijuana 6 or more times will require a drug waiver (Reference is Pre-Service Drug Abuse Message). Questions about law violations can be found in ANGI 36-2005 Attachment 7.

12 April 12: Please note that officer qualification standards are subject to change. All officer applications are only basic prequalification, and upon selection, all applicants will be required to complete a commissioning package and physical that could result in disqualification. Medical prequalification should be made by qualified medical personnel.

***BE SURE TO OBTAIN THE CURRENT VERSION FROM YOUR DESIGNATED OFFICER RECRUITER (DOR).**

**OFFICER APPLICANT PREQUALIFICATION CHECKLIST
CURRENT ANG/AF/AFRES ENLISTED**

- _____ A1YO WS 1 ANG Officer Application Worksheet – complete with your DOR.
- _____ A1YO WS 2 ANG Officer Application Statement of Understanding – complete with your DOR.
- _____ AF Form 883, Privacy Act Form
<http://www.e-publishing.af.mil/shared/media/epubs/af883.xfd>
 - Print and review the form. Do not sign it until you are with your DOR.
- _____ AF Form 2030, Drug and Alcohol Abuse Certificate
<http://www.e-publishing.af.mil/shared/media/epubs/af2030.xfd>
 - Print and review the form. Do not complete it until you are with your DOR.
- _____ Resume and cover letter
- _____ Official AFOQT scores
<https://w20.afpc.randolph.af.mil/afoqtsnet20/DODBanner.aspx>
 - Print the page for turn-in to your DOR.
- _____ GRE or GMAT (if applying for a 41AX Health Administrator position and do not hold the AFSC)
- _____ Pilot Candidate Selection Method (PSCM) Score and copy of private pilot's license (if applicable)
- _____ Official College Transcripts. Unsealed accepted. No Internet transcripts allowed.
- _____ Certificate of Admission to Bar (if applicable)
- _____ Medical/Dental/Nursing License (if applicable)
- _____ Personal Individual Medical Readiness (PIMR) found on the AF Portal > Featured Links > Fitness & Health > Medical Readiness-Deployment Health > My Individual Medical Readiness Status
 - Print the page for turn-in to the DOR.
- _____ Passing Fitness Test results within the last 12 months found on the AF Portal > Featured Links > AFFMS-AF Fitness Management System
 - Print the page for turn-in to the DOR.
- _____ All Prior Service Records: DD Form 214 (Certificate of Release or Discharge from Active Duty) and/or NGB Form 22 (National Guard Report of Separation and Record of Service, Separation Orders) found on the AF Portal > ARMS-Auto Records Mgt Sys or PRDA-Personnel Records Display. Print for DOR.
- _____ Current Report on Individual Personnel (RIP) Sheet found on the AF Portal > Virtual MPF > Record Review/Update > View/Print All Pages. Print for DOR.

PRIVACY ACT STATEMENT -- US AIR FORCE APPLICATION RECORD

AUTHORITY: 10 USC Sections 133, 265, 275, 504, 508, 510, 672(d), 678, 837, 1007, 1071 through 1480, 1553, 2105, 2107, 3012, 5031, 8013, 8033, 8496, and 9411; 32 USC 708; 44 USC 3101; and Executive Orders 9397, 10450, and 11652.

PURPOSE: To determine your mental, medical, and moral qualifications for entry into the US Air Force. This data is FOR OFFICIAL USE ONLY and will be maintained in strict confidence within the Department of Defense according to Federal law and regulation. If you are accepted and subsequently enter into a component of the Air Force, the information becomes a part of your military personnel records which is used to provide information for personnel management actions. If you are not accepted or do not subsequently enter a component of the Air Force, your records will be destroyed as specified by regulation.

ROUTINE USES: This information may be disclosed to the Social Security Administration and the Department of Treasury to establish a record of income; to federal, state, local or foreign law enforcement authorities for investigating or prosecuting a violation or potential violation of law; to federal, state, or local agencies to obtain information concerning hiring or retention of an employee, issuance of a security clearance, letting of a contract, or issuance of a license, grant or other benefit; to a federal agency in response to its request in connection with the hiring or retention of an employee, issuance of a security clearance, reporting of an investigation of an employee, letting of a contract, issuance of a license, grant, or other benefit by the requesting agency to the extent that the information is relevant and necessary to the requesting agency's decision on the matter; to a congressional office in response to their inquiry made at the request of the individual; to the Office of Management and Budget (OMB) in connection with review of private relief legislation as set forth in OMB Circular A19; to foreign law enforcement, security, investigatory, or administrative authorities to comply with requirements of international agreements and arrangements; to state and local taxing authorities in accordance with Treasury Fiscal Requirements Manual Bulletin 7607; to the Office of Personnel Management (OPM) concerning information on pay and leave, benefits, retirement deductions, and other information necessary for OPM to carry out its functions; to NARA for records management functions; and to the Department of Justice for pending or potential litigation.

Johnny K. Applicant April 10, 2012

DISCLOSURE IS VOLUNTARY: However, failure to furnish information needed to determine your mental, medical and moral qualifications for entry into the US Air Force will result in a denial of application.

USAF DRUG AND ALCOHOL ABUSE CERTIFICATE		
PRIVACY ACT STATEMENT		
<p>AUTHORITY: Title 10 U.S.C., Chapter 31, Sections 504, 505, 508, 513; Chapter 807, Section 8067; Chapter 833, Section 8258; Chapter 1205, Sec12201, and Executive Order 9397 (SSN), as amended.</p> <p>PURPOSE: To determine enlistment/commissioning eligibility, and process qualified applicants. To determine classification and assignment actions after enlistment or commissioning. All documents are source documents in determining benefits/entitlements.</p> <p>ROUTINE USES: Disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act outside the DoD as a routine use. 'Blanket Routine Uses' apply.</p> <p>DISCLOSURE: Voluntary; however, failure to furnish personal identification information may negate the enlistment/commissioning application.</p>		
SECTION I. DEFINITION OF TERMS		
<p>ADVERSE ADJUDICATION: An adverse adjudication (<i>adult or juvenile</i>) is a finding, decision, sentence, or judgment, other than unconditionally dropped, dismissed, or acquitted. If the adjudicating authority places a condition or restraint that leads to dismissal, dropped charges, or acquittal, the adjudication is adverse. Suspension of sentence, pardon, not processed, or dismissal after compliance with imposed conditions is adverse adjudication.</p> <p>AIR FORCE: Includes active Air Force, Air Force Reserve, Air National Guard, and Air Force Academy.</p> <p>ALCOHOL ABUSE: Alcohol use confirmed by competent medical authority that the individual is emotionally, mentally, or physically dependent on alcohol. NOTE: When not confirmed by medical authority, self-admitted alcohol use that leads to a person's misconduct or unacceptable behavior; to the impairment of work performance, physical or mental health, financial responsibility or personal relationships; must be reported during the medical examination for determination of alcohol abuse.</p> <p>DRUG ABUSE: The illegal, wrongful, or improper use of marijuana, any narcotic substance, hallucinogens, or any illegal drug.</p> <p>ILLEGAL DRUGS: Any drug or narcotic that is habit forming or has a potential for abuse because of its stimulant, depressant, or hallucinogenic effect. Includes, but not limited to: cocaine, crack, hallucinogens, (<i>to include lysergic acid diethylamide (LSD), phencyclidine (PCP), tetrahydrocannabinol (THC) in non-marijuana form, and others</i>), opium, morphine, heroin, dilaudid, codeine, Demerol, inhalants (<i>paint, glue, and others</i>), amphetamines (<i>speed</i>), methamphetamines (<i>ice</i>), barbiturates (<i>downers</i>) and anabolic steroids.</p> <p>MARIJUANA: Any intoxicating organic or synthetic cannabis or tetrahydrocannabinol (THC) type substance. Organic forms from the hemp plant include marijuana, hashish and all derivatives of cannabis sativa. Synthetically, in the form of an herbal and chemical product which, when consumed mimics the effects of cannabis, includes salviadivinorum or salvinorum or any product known under such names as "Spice", "Genie", "DaScents", "Zohia", "K-2", and "KO Knockout 2" or variant thereof by whatever name it may be called.</p>		
SECTION II. CERTIFICATION AT TIME OF APPLICATION		
<p>WARNING: YOU MUST BE TOTALLY HONEST IN COMPLETING THIS FORM. If you are truthful now and are accepted by the Air Force, no punitive action can or will be taken against a civilian applicant as a result of any information you reveal. HOWEVER, YOU ARE CAUTIONED THAT SHOULD YOU CONCEAL DRUG OR ALCOHOL ABUSE INFORMATION AT THIS TIME, AND IT IS DISCOVERED AFTER YOUR ENTRY INTO THE AIR FORCE, PUNITIVE ACTION MAY BE TAKEN AGAINST YOU BASED UPON THE FALSE INFORMATION YOU HAVE PROVIDED. Such action includes, but is not limited to, elimination from training or discharge under less than honorable conditions.</p>		
INITIAL YES/NO BOXES AS APPLICABLE	YES	NO
I have read and understand the definition of the terms above.	<i>JKH</i>	
Have you ever used or experimented with marijuana? (<i>Prior marijuana use is not disqualifying for enlistment or appointment, unless you are determined to be a chronic user or psychologically dependent, have been convicted or adversely adjudicated for marijuana involvement. Preservice marijuana use may render you ineligible for certain skills.</i>)		<i>JKH</i>
Have you ever experimented with, used, or possessed any illegal drug or narcotic?		<i>JKH</i>
Have you ever been a supplier or distributor of or a trafficker in marijuana, or other illegal drugs or narcotics?		<i>JKH</i>
Have you ever been treated or undergone rehabilitation for drug or alcohol abuse?		<i>JKH</i>
Have you consumed hemp seed oil or any products containing hemp seed oil in the last 45 days?		<i>JKH</i>
SECTION III. STATEMENTS OF UNDERSTANDING		INITIALS
During my medical examination I will be tested and screened for drug and alcohol abuse. I understand that any detection of drug use (<i>including marijuana</i>) or alcohol abuse will render me ineligible for the Air Force. I understand I will undergo further drug and alcohol screening after entry in the Air Force, and I may be discharged based on the results of such screening.		<i>JKH</i>
Service in the United States Air Force places me in a position of special trust and responsibility. Drug or alcohol abuse after this date will be considered evidence of my inability to meet the standards of behavior expected of me as a member of the Air Force. Therefore, any drug use (<i>including marijuana</i>) or any alcohol abuse as described above, FROM THIS DATE FORWARD , renders me ineligible for the Air Force.		<i>JKH</i>
Drug and alcohol abuse by members of the U.S. Air Force violates Air Force standards of behavior and conduct and will not be tolerated. If I am identified as a drug or alcohol abuser while a member of the Air Force, appropriate disciplinary or administrative action may be taken against me, to include trial by court martial or discharge under less than honorable conditions.		<i>JKH</i>
I understand that certain skill areas in the Air Force cannot be performed by persons who have abused drugs or alcohol. My unit commander will have final approval authority regarding my actual assignment to sensitive skill positions. If I am not acceptable for such duties due to information I have revealed on this form, I will be reassigned to another position in my skill or reclassified into another skill. If it is established that I have used any substance beyond that which I have indicated on this form, I understand my enlistment, commissioning, or appointment may be declared fraudulent and I may be discharged.		<i>JKH</i>
<p>KNOWING AND UNDERSTANDING ALL THE INFORMATION ABOVE, AND REALIZING THAT THIS DOCUMENT WILL BE USED ONLY TO DETERMINE MY ELIGIBILITY AND RECORD MY CERTIFICATION OF ELIGIBILITY, I HEREBY STATE THAT THE ABOVE INFORMATION AS TO MY PREVIOUS DRUG OR ALCOHOL INVOLVEMENT IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.</p>		
DATE	NAME (<i>Last, First, M.I.</i>) AND SSN OF APPLICANT	SIGNATURE
20121212	Applicant, Johnny K. 123-45-6789	<i>Johnny K. Applicant</i>

WITNESS		
I CERTIFY THE ABOVE INDIVIDUAL SIGNED THIS CERTIFICATE OF HIS/HER OWN FREE WILL		
DATE 20121212	NAME (Last, First, M.I.) AND GRADE OF WITNESS Recruiter, Designated O. E-6	SIGNATURE <i>Designated O. Recruiter</i> Or if electronic - Click here to sign
REMARKS		
<p>**If you initialled "Yes" for experimenting with marijuana on page 1 a brief statement is required here. The statement needs to include:</p> <ol style="list-style-type: none"> 1. How many times you experimented with marijuana 2. When was the last date used 3. Why you stopped <p>Any marijuana use of 6 or more times will require a waiver.</p> <p>The area below is left blank until actual accession. Please do not fill for prequalification.</p>		
SECTION IV. RECERTIFICATION AT TIME OF ENLISTMENT, COMMISSIONING, OR APPOINTMENT		INITIALS
I have read and fully understand all the information on this form.		
I hereby state that there has been no change in my status since I originally provided this information on the date on front of this form.		
I hereby certify that I have not used any drug, including marijuana, and that I have not been in any alcohol related abuse incidents, since I originally completed this form.		
DATE	NAME (Last, First, M.I.) AND SSN OF APPLICANT	SIGNATURE
WITNESS		
I CERTIFY THE ABOVE INDIVIDUAL SIGNED THIS CERTIFICATE OF HIS/HER OWN FREE WILL		
DATE	NAME (Last, First, M.I.) AND GRADE OF WITNESS	SIGNATURE



YOUR UNIT LETTERHEAD

123 MILITARY DRIVE
CITY, ST ZIP

**THIS IS AN EXAMPLE COVER LETTER.
WE ARE NOT RECOMMENDING YOU USE THIS FORMAT
IF IT DOES NOT REFLECT YOU.**

Johnny K. Applicant
123 Apple Drive
City, ST 12345

DATE

Selection Board
123 Board Drive
City, ST 12345

Greetings Selection Board,

As a recent college graduate and a current employee of the U.S. Department of Defense, I am very excited to continue my future working with the ANG as a commissioned officer. I am very impressed with the mission of our organization and more specifically the opportunity available as an officer. I am writing to apply for your officer candidacy program.

As you can see from my resume, my skills and qualifications would make me an outstanding candidate. I am convinced my skills can make a difference to the ANG team. I am currently employed in the civilian sector as well as am an Air National Guardsman. I am certain my personal attributes and past experiences give me a unique perspective as an officer candidate and I would be honored to continue my Air Force career as such as officer.

Thank you for the opportunity to present myself and for your consideration in choosing me as the next Air National Guard officer. If you need to contact me to discuss my qualifications, please call me at (123) 456-7890 or email me at johnny.applicant@ang.af.mil.

Johnny K. Applicant

Johnny K. Applicant
SSgt, ANG

PERSONAL DATA

JOHNNY K. APPLICANT, SSgt, ANG

DOR: 12 Feb 2007

Comm: (123) 456-7890

Clearance: Secret

THIS IS AN EXAMPLE RESUME.

WE ARE NOT SUGGESTING YOU USE THIS FORMAT
IF IT DOES NOT REFLECT YOU.**OBJECTIVE/GOALS:**

To obtain and succeed in the position a commissioned officer.

EMPLOYMENT HISTORY

- April 2010 – Present **Military Communications Technician, Air National Guard**
Prepares military communications near and far to ensure only the best information is used to determine outstanding results. Trains and supervises 8 subordinates in the demanding field of military communications. Coordinates with internal and external customers to debrief military communications.
- Aug 2009 – Present **Statistician, Military Gizmo Company**
Creates military gizmos for every component of the military. Supports the field with research and development for the appropriate gizmos that fulfill and complete the military mission. Supervises 2 junior statisticians and a field office.
- Jun 2006 – April 2010 **Airman Duty, Air National Guard**
Researches and completes reports. Distributes and files internal and external correspondence to identified field units. Enforces internal procedures to ensure local operations run efficiently and concerns are handled at the functional level. Assists Sergeant Duty in compiling and analyzing projects in a highly efficient manner.
- Jun 2006 – Aug 2009 **Inventory Specialist, Generic Company USA**
Coordinates and distributes \$10,000,000 worth of inventory by using the Special Inventory Protocol (SIP) program.

EXAMPLE

PROFESSIONAL MILITARY EDUCATION

- 19 Aug 2009 USAF NCO Preparatory Course In-Residence, Distinguished Graduate

SIGNIFICANT AWARDS

- 10 Aug 2010 Honor Graduate, USAF Military Communications Technician Course

PERSONAL INTERESTS

My wife and two rambunctious children are the joy in my life. I am also completing my Master's degree and am projected to gain that in July 2013.

Found at <https://w20.afpc.randolph.af.mil/afoqtsnet20/DODBanner.aspx>



**AIR FORCE
PERSONNEL CENTER**

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Air Force Officer Qualifying Test Scores

Test Results

This document contains information which must be protected IAW AFI 33-332 and DOD Regulation 5400.11. Privacy Act of 1974, as amended, applies and it is For Official Use Only (FOUO).

Today: JANUARY 25, 2008

Test Scores of APPLICANT, JOHNNY K.

Test Date	TCO	Form/Version	Pilot	Navigator	Acad Aptitude	Verbal	Quantitative
05 JAN 2008	123	ABCD	44	55	66	77	88

Note: The scores listed above are the only valid scores.

[Check another score](#)

NOTICE: For Security reasons close out all browsers when finished.

EXAMPLE

This contains information which must be protected IAW AFI 33-332 and DoD Regulation 5400.11; Privacy Act of 1974 as Amended Applies, and it is For Official Use Only (FOUO). It must be protected or privacy act information removed prior to further disclosure.

OFFICIAL TRANSCRIPT
ISSUED TO STUDENT
IN SEALED ENVELOPE

TRANSCRIPT

Name: JOHNNY APPLICANT

Social Security No.: 123-45-6789

Student ID No 123456

Date of Birth: June 12, 1984

Degree: Bachelor of Arts

Major 1:

Major 2:

Degree Date:

Concentration 1:

Concentration 2:

Class:

Minor 1:

Minor 2:



(F2Z) Fall II 2005 (cont.)							(U1T) Summer 2006						
Total	Total	Grade	Grade				CJ350	Criminal	Justice Mgt & Planning	3.00	A		
Earned	Earned	Applied	Pt Hrs	Points	GPA		Total	Total	Applied	Pt Hrs	Points	GPA	
ses 6.00	3.00	6.00	3.00	12.00	4.000		ses 3.00	3.00	3.00	3.00	12.00	4.000	
cum 107.00	36.00	107.00	36.00	141.00	3.916		cum 119.00	45.00	119.00	45.00	177.00	3.937	
(F2T) Fall II 2005							(F1T) Fall I 2006						
CJ313 The Law of Evidence 3.00 A							CJ400 Constitutional Law in Crim Just 3.00 A						
Total	Total	Grade	Grade				Total	Total	Grade	Grade			
Earned	Earned	Applied	Pt Hrs	Points	GPA		Earned	Earned	Applied	Pt Hrs	Points	GPA	
ses 3.00	3.00	3.00	3.00	12.00	4.000		ses 3.00	3.00	3.00	3.00	12.00	4.000	
cum 110.00	39.00	110.00	39.00	153.00	3.923		cum 122.00	51.00	122.00	51.00	189.00	3.937	
(S1Z) Spring I 2006							(F2T) Fall II 2006						
CS219 Programming Fundamentals 3.00 A							CJ450 Senior Seminar in Criminal Just 3.00 A						
Total	Total	Grade	Grade				Total	Total	Grade	Grade			
Earned	Earned	Applied	Pt Hrs	Points	GPA		Earned	Earned	Applied	Pt Hrs	Points	GPA	
ses 3.00	3.00	3.00	3.00	12.00	4.000		ses 3.00	3.00	3.00	3.00	12.00	4.000	
cum 113.00	42.00	113.00	42.00	165.00	3.928		cum 125.00	51.00	125.00	51.00	201.00	3.941	
(S2Z) Spring II 2006							(S1T) Spring I 2007						
Transfer from DANTES							SO302 The Study of the Family 3.00 A						
SO483 The Civil War & Reconstruction 3.00 TR							SO315 Minority Group Relations 3.00 A						
Total	Total	Grade	Grade				Total	Total	Grade	Grade			
Earned	Earned	Applied	Pt Hrs	Points	GPA		Earned	Earned	Applied	Pt Hrs	Points	GPA	
ses 3.00	0.00	3.00	0.00	0.00	0.000		ses 6.00	6.00	6.00	6.00	24.00	4.000	
cum 116.00	42.00	116.00	42.00	165.00	3.928		cum 131.00	57.00	131.00	57.00	225.00	3.947	

Name: _____

Social Security No.:
Date of Birth:

Student ID No.

Degree:
Major 1:
Major 2:

Degree Date:
Concentration 1:
Concentration 2:

Class:
Minor 1:
Minor 2:

(S12) Spring I 2007

***** TRANSCRIPT TOTALS *****

Transfer from DANIES

SE495	Drug & Alcohol Abuse	3.00	TR	Total	Park	Total	Grade	Grade	
SF531	Organizational Behavior	3.00	TR	Earned	Earned	Applied	Pt Hrs	Points	GPA
SGS30	Human Resource Management	3.00	TR	60.00	60.00	60.00	60.00	237.00	3.950
Total	Total	Grade	Grade	TRSEFR	83.00	0.00	83.00	0.00	0.000
Earned	earned	Applied	Pt Hrs	Points	GPA	TOTAL	143.00	60.00	143.00
9.00	0.00	9.00	0.00	0.000					
140.00	57.00	140.00	57.00	237.00	3.947				

(VIZ) Summer 2007

Total		Total		Grade	Grade	
Earned		Applied	Ft Hrs	Points	GPA	
3.00	3.00	3.00	3.00	12.00	4.000	
143.00	60.00	143.00	60.00	237.00	3.950	

Degree: Bachelor of Science
Awarded: 07/29/2007
Major: Crim Justice Admin

<----- *Designation of degree and date awarded is required on transcript

*No online transcript printouts accepted

*All transcripts are required in order to determine qualification of AFSC

----- Accomplishments Thgh 2007 -----
07/29/07 Summa Cum Laude

12/18/64 Dean's List

Air Force Surgeon General

ASIMS Web

Individual Medical Readiness Status

APPLICANT.JOHNNY.K.1234567890

ANG

EMAIL: johnny.applicant@ang.af.mil

Action List

(Nothing due)

Immunizations

Immunization	Series	Date	Next Due
Hep A	2	2 Oct 1999	
Influenza	13	22 Nov 2011	1 Sep 2012
MMR	1	1 Jan 1985	
Polio	1	1 Mar 1995	
Td	4	12 Jul 2009	12 Jul 2019

DD2766

View Worksheet

EXAMPLE

ENSURE YOU ARE CURRENT

Medical Readiness											
Overall Status:		Current									
PHA		Dental		Labs		Profile		Med Equipment		Other	
Current		Current		Current		Ready		Current			
Health Assessment:	27 Apr 2011	Dental Class:	1	Blood Type:	O	Restriction:	No	GMI Required:	No	ANAM Date:	-
Interval History:	27 Apr 2011	Dental Date:	28 Feb 2012	RH:	Positive	Release Date:	1 May 2012				
DD2766 Review and Update:	25 May 2011			Sickle Cell:	Negative						
Provider Review/Signature:	25 May 2011			G6PD:	Normal		AF469			AF422a	
Last In-Person Visit:	-			HIV Date:	24 May 2011						
				DNA:	On File						

Deployment Health Assessments

Form	Form Date	Deploy Date	Return Date	Closed Date
No deployment health assessment forms.				

For More Information Contact

Fitness Management System

Report of Individual Fitness for: SSG JOHNNY APPLICANT
SSAN: XXX-XX-6789

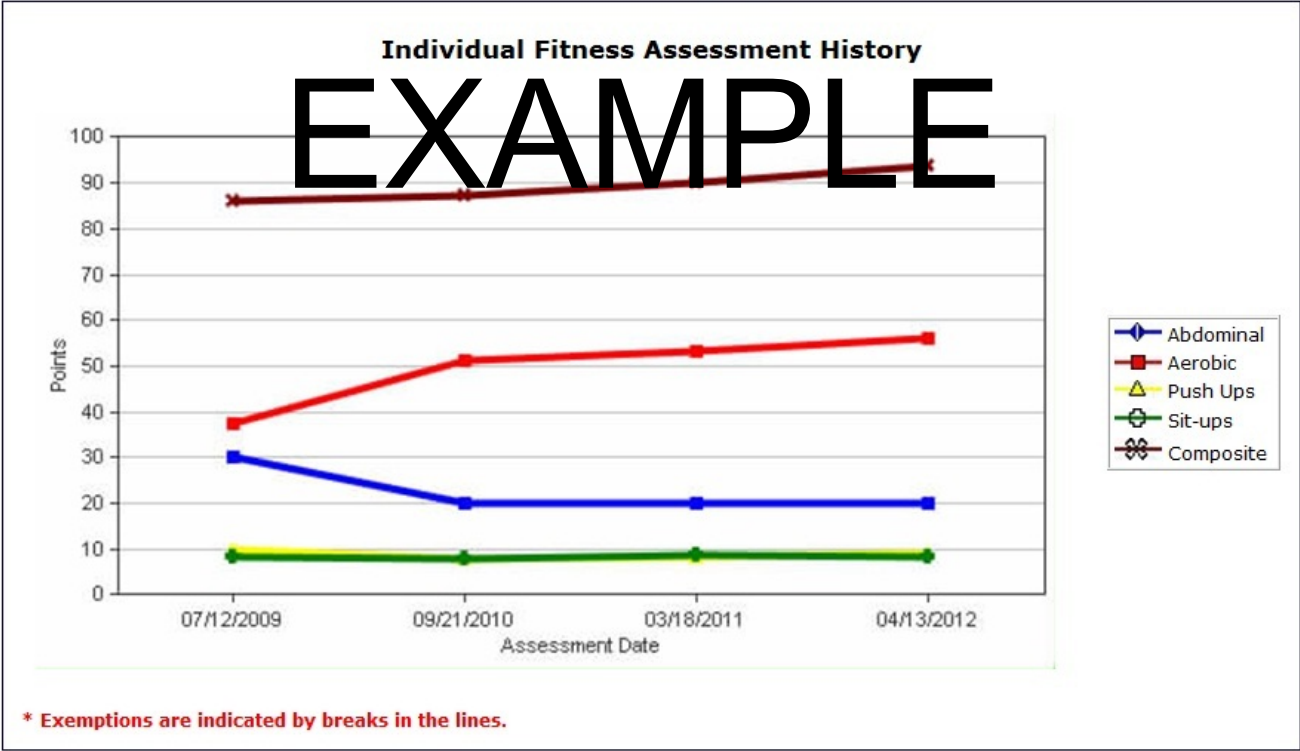
[Click here to print](#)

ANG READINESS

Pascode: AB1CDE2 Prepared on: 04/27/2012 at 12:06 GMT

Age	Gender	Height	Weight	BM
27	M	72"	190.0 lbs	11 kg/m
		Score	Points	Max Points
1.5 Mile Run		35	56.00	60.00
Abdominal Circumference		30"	20.00	20.00
Push Ups		45	9.20	10.00
Sit-ups		44	8.50	10.00
Test entered/changed by: FACILITATOR			Total Points 93.7	100.00
Exemption Type:		Next test due date: 04/30.2013	Fitness Level	Excellent

Member Air Force fitness ranking is: Top 50% of the AF
Member age and gender fitness ranking is: Top 50% of the AF



Individual Test History							
Name: JOHNNY APPLICANT		Rank: SSG Unit: ANG		SSAN: XXX-XX-6789			
Test Date	Cardio Results	Abdominal Circumference (in)	Push Ups	Sit-Ups	Composite Score	Fitness Level	Test Entered By
04/13/2012	35/56	30	45	44	93.7	Excellent	FACILITATOR

1. NAME (Last, First, Middle) APPLICANT, JOHNNY K		2. DEPARTMENT, COMPONENT AND BRANCH AIR FORCE--ANGUS		3. SOCIAL SECURITY NUMBER 123 - 45 - 6789									
4a. GRADE, RATE OR RANK SSGT		b. PAY GRADE E-5		5. DATE OF BIRTH (YYYYMMDD) 19840612									
				6. RESERVE OBLIGATION TERMINATION DATE (YYYYMMDD) 20160101									
7a. PLACE OF ENTRY INTO ACTIVE DUTY CITY, STATE USA		b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) 1234 APPLE DRIVE, CITY, ST 12345											
8a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND ANG		b. STATION WHERE SEPARATED CITY,, STATE USA											
9. COMMAND TO WHICH TRANSFERRED ANG, STATE				10. SGLI COVERAGE <input type="checkbox"/> NONE AMOUNT: \$400,000									
11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.) XXXXX AFSC 8 MONTHS 2 DAYS		12. RECORD OF SERVICE		YEAR(S) MONTHS(S) DAY(S)									
		a. DATE ENTERED AD THIS PERIOD		2008 JUN 11									
		b. SEPARATION DATE THIS PERIOD		2008 MAY 10									
		c. NET ACTIVE SERVICE THIS PERIOD		07 02 02									
		d. TOTAL PRIOR ACTIVE SERVICE		00 00 00									
		e. TOTAL PRIOR INACTIVE SERVICE		00 00 00									
		f. FOREIGN SERVICE		00 00 00									
		g. SEA SERVICE		00 00 00									
		h. EFFECTIVE DATE OF PAY GRADE		2004 MAR 06									
13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service) Armed Forces Reserve Medal with 3 'M' Devices with 1 hourglass device.		14. MILITARY EDUCATION (Course title, number of weeks, and month and year completed) NONE THIS PERIOD.											
EXAMPLE													
15a. MEMBER CONTRIBUTED TO POST-VIETNAM ERA VETERANS' EDUCATIONAL ASSISTANCE PROGRAM b. HIGH SCHOOL GRADUATE OR EQUIVALENT				<table border="1"> <tr> <td></td> <td>YES</td> <td>X</td> <td>NO</td> </tr> <tr> <td>X</td> <td>YES</td> <td></td> <td>NO</td> </tr> </table>			YES	X	NO	X	YES		NO
	YES	X	NO										
X	YES		NO										
16. DAYS ACCRUED LEAVE PAID 0		17. MEMBER WAS PROVIDED COMPLETE DENTAL EXAMINATION AND ALL APPROPRIATE DENTAL SERVICES AND TREATMENT WITHIN 90 DAYS PRIOR TO SEPARATION		<table border="1"> <tr> <td>YES</td> <td>NO</td> </tr> <tr> <td></td> <td>X</td> </tr> </table>		YES	NO		X				
YES	NO												
	X												
18. REMARKS MEMBER WAS SERVING ON ACTIVE DUTY IN A VOLUNTARY STATUS UNDER TITLE 32 USC 503 12 JUL 06 - 30 JUN 07. Copy 3 to DVA Data.													

-NOTHING FOLLOWS

Found on the AF Portal > ARMS-Auto Records Mgt Sys or PRDA- Personnel Records Display

The information contained herein is subject to computer matching within the Department of Defense or with any other affected Federal or non-Federal agency for verification purposes and to determine eligibility for, and/or continued compliance with, the requirements of a Federal benefit program.

19a. MAILING ADDRESS AFTER SEPARATION (<i>Include ZIP Code</i>) 1234 APPLE STREET CITY, STATE 12345						b. NEAREST RELATIVE (<i>Name and address - include ZIP Code</i>) 1235 APPLE STREET CITY, STATE 12345											
20. MEMBER REQUESTS COPY 6 BE SENT TO								UT	DIRECTOR OF VETERANS AFFAIRS					X	YES		NO
21. SIGNATURE OF MEMBER BEING SEPARATED MEMBER NOT AVAILABLE TO SIGN				22. OFFICIAL AUTHORIZED TO SIGN (<i>Typed name, grade, title and signature</i>) PERSONNEL TECHNICIAN, ANG 													

SPECIAL ADDITIONAL INFORMATION (For use by authorized agencies only)

23. TYPE OF SEPARATION RELEASE FROM ACTIVE DUTY		24. CHARACTER OF SERVICE (Include upgrades) HONORABLE	
25. SEPARATION AUTHORITY AFH 10-416		26. SEPARATION CODE T50	27. REENTRY CODE N/A
28. NARRATIVE REASON FOR SEPARATION RELEASE DUE TO DEMOBILIZATION			
29. DATES OF TIME LOST DURING THIS PERIOD NONE			30. MEMBER REQUESTS COPY 4 (Initials) N/A

PRINT AND INCLUDE ALL PAGES, NOT JUST FIRST PAGE. May be more or less than 8, this is an example.
Found at AF Portal > Virtual MPF > Record Review/Update > View/Print All Pages.

Personal Information – Print All Pages

Page 1 of 8

NAME: JOHNNY K APPLICANT RANK: SSG SSAN: 123-45-6789 DATE: 24 APR 2012

INDIVIDUAL INFORMATION

MARITAL STATUS: MARRIED

PERSONAL EMAIL ADDRESS:

JOHNNYAPPLICANT@GMAIL.COM

DUTY EMAIL ADDRESS:

JOHNNYAPPLICANT@ANG.AF.MIL

HOME PHONE: 123-456-7890

HOME ADDRESS:

1234 APPLE DRIVE

CITY, ST 12345

MAILING ADDRESS:

1234 APPLE DRIVE

CITY, ST 12345

SEX: MALE

RACE: ASIAN, NATIVE HI/PACIFIC ISL

HISPANIC DECLARATION: NOT HISPANIC OR
LATINO

ETHNIC GROUP: ASIAN

RELIGIOUS PREFERENCE: NO RELIGIOUS PREFERENCE

DATE OF BIRTH: 12 JUN 1984

PLACE OF BIRTH: CALIFORNIA

CITIZENSHIP: BY BIRTH IN UNITED STATES

WEIGHT MANAGEMENT:

EFFECTIVE DATE:

N/A

UNFAVORABLE INFORMATION FILE: NO UIF

CONTROL ROSTER: NOT ON CONTROL ROSTER

CONSENT TO RELEASE:

THIS DOCUMENT CONTAINS INFORMATION WHICH MUST BE PROTECTED
IAW AFI 33-322 AND DOD REGULATION 5400.11.
PRIVACY ACT OF 1974, AS AMENDED, APPLIES.



Date of Request	Apr 13, 2012
AFRISS APP ID	38422898

ANG Officer Application Worksheet

The information herein is for Official Use Only (FOUO) which must be protected under the Privacy Act of 1974 as amended. Unauthorized disclosure or misuse of this Personal Information may result in criminal and/or civil penalties.

Last Name Applicant		First Name Johnny		Middle K		<input type="checkbox"/> Full Time Hire	
DOB Jun 12, 1984	Email johnnyappliant@gmail.com			Phone # (123) 456-7890		Date ANG Officer Selection	
DOR Last Name Recruiter	DOR First Name Designated	State/ISR HI	ISR Last Name		ISR First Name		
AFOQT Date Feb 13, 2012	Verbal 33	Aptitude 44	Quantitative 55	Pilot 66	Navigator 77	MSC Applicants	GRE
						GMAT	

Experience	Category Current	Program ANG Enlisted	Paygrade E-5	Current AFSC/MOS/RATE 1N071
	Degree Level Bachelors	Degree Type B.S. Management	Civilian Medical Speciality	
Physical	Date of Physical Nov 7, 2011	Type of Physical PHA	US Citizen Yes	
	Waiver Required <input type="checkbox"/>	Type	Moral Category Level	Waiver Explanation

<input type="checkbox"/> AFSC Desired	<input type="checkbox"/> Space, Missile, and C2 (13XX)	<input type="checkbox"/> Operations Support (16XX)	<input checked="" type="checkbox"/> Security Forces (31XX)	<input checked="" type="checkbox"/> Force Support (38XX)	<input type="checkbox"/> BioMed Spec (43XX) (Phar, PH)	<input type="checkbox"/> Nurse (46XX)	<input type="checkbox"/> Law (51XX) (JAG)	<input type="checkbox"/> Contracting (64XX)
<input type="checkbox"/> Pilot (11XX)	<input type="checkbox"/> Intelligence (14XX)	<input type="checkbox"/> Cyber Operations (17XX)	<input type="checkbox"/> Civil Engineer (32XX)	<input type="checkbox"/> Health Services (41XX)	<input type="checkbox"/> Physician (44XX)	<input type="checkbox"/> Dental (47XX)	<input type="checkbox"/> Chaplain (52XX)	<input checked="" type="checkbox"/> FM (65XX)
<input type="checkbox"/> Navigator (12XX)	<input type="checkbox"/> Weather (15XX)	<input checked="" type="checkbox"/> Logistics (21XX) (Maintenance)	<input checked="" type="checkbox"/> Public Affairs (35XX)	<input type="checkbox"/> BioMed Clinician (42XX) (Opt, PA)	<input type="checkbox"/> Surgery (45XX) (Aneth, Ortho)	<input type="checkbox"/> Aerospace Medicine (48XX)	<input type="checkbox"/> Scientific (61XX) Dev Eng (62XX)	<input type="checkbox"/> Insp General (87XX)

Select Desired Location		<input type="checkbox"/> ANY LOCATION		<input type="checkbox"/> MA Otis ANGB	<input type="checkbox"/> NE Lincoln	<input type="checkbox"/> OR Portland	<input type="checkbox"/> TX Beaumont
<input type="checkbox"/> AK Eielson	<input type="checkbox"/> CO Colorado Springs	<input type="checkbox"/> HI Kekaha	<input type="checkbox"/> MA Westfield	<input type="checkbox"/> NE Offutt AFB	<input type="checkbox"/> OR Salem	<input type="checkbox"/> TX Dallas	
<input type="checkbox"/> AK Ft Richardson	<input type="checkbox"/> CO Greeley	<input type="checkbox"/> HI Waimea	<input type="checkbox"/> MD Baltimore	<input type="checkbox"/> NH Pease ANGB	<input type="checkbox"/> OR Warrenton	<input type="checkbox"/> TX Ellington ARB	
<input type="checkbox"/> AK Anchorage	<input type="checkbox"/> CT East Granby	<input type="checkbox"/> HI Wheeler AAF	<input type="checkbox"/> ME Augusta	<input type="checkbox"/> NJ Atlantic City	<input type="checkbox"/> PA Coraopolis	<input type="checkbox"/> TX Fort Bliss	
<input type="checkbox"/> AL Birmingham	<input type="checkbox"/> CT Orange	<input type="checkbox"/> IA Des Moines	<input type="checkbox"/> ME Bangor	<input type="checkbox"/> NJ McGuire AFB	<input type="checkbox"/> PA Ft Indiantown	<input type="checkbox"/> TX Fort Worth	
<input type="checkbox"/> AL Dothan	<input type="checkbox"/> DC Andrews AFB	<input type="checkbox"/> IA Ft Dodge	<input type="checkbox"/> ME Portland	<input type="checkbox"/> NM Kirtland AFB	<input type="checkbox"/> PA Harrisburg	<input type="checkbox"/> TX Garland	
<input type="checkbox"/> AL Montgomery	<input type="checkbox"/> DE New Castle	<input type="checkbox"/> IA Iowa City	<input type="checkbox"/> MI Ann Arbor	<input type="checkbox"/> NV Reno	<input type="checkbox"/> PA Johnstown	<input type="checkbox"/> TX Houston	
<input type="checkbox"/> AR Camp Robinson	<input type="checkbox"/> FL Jacksonville	<input type="checkbox"/> ID Boise	<input type="checkbox"/> VT Littleton	<input type="checkbox"/> NY Niagara Falls	<input type="checkbox"/> PA Middletown	<input type="checkbox"/> TX La Porte	
<input type="checkbox"/> AR Fort Smith	<input type="checkbox"/> FL Macdill AFB	<input type="checkbox"/> ID Mountain Home	<input type="checkbox"/> MI Lansing	<input type="checkbox"/> NY Rome	<input type="checkbox"/> PA Pittsburgh	<input type="checkbox"/> TX Lackland	
<input type="checkbox"/> AR Little Rock	<input type="checkbox"/> FL Patrick AFB	<input type="checkbox"/> IL Springfield	<input type="checkbox"/> MI Selfridge ANGB	<input type="checkbox"/> NY Schenectady	<input type="checkbox"/> PA State College	<input type="checkbox"/> TX Randolph	
<input type="checkbox"/> AZ Davis Monthan	<input type="checkbox"/> FL Saint Augustine	<input type="checkbox"/> IL Peoria	<input type="checkbox"/> MN Duluth	<input type="checkbox"/> NY Stewart AFB	<input type="checkbox"/> PA Willow Grove	<input checked="" type="checkbox"/> UT Salt Lake Gty	
<input type="checkbox"/> AZ Phoenix	<input type="checkbox"/> FL Starke	<input type="checkbox"/> IL Scott AFB	<input type="checkbox"/> MN St Paul	<input type="checkbox"/> NY Syracuse	<input type="checkbox"/> PR Aguadilla	<input type="checkbox"/> VA Langley AFB	
<input type="checkbox"/> AZ Tucson	<input type="checkbox"/> FL Tyndall AFB	<input type="checkbox"/> IN Fort Wayne	<input type="checkbox"/> MO Bridgeton	<input type="checkbox"/> NY West Hampton	<input type="checkbox"/> PR Carolina	<input type="checkbox"/> VA Sandston	
<input type="checkbox"/> CA Beale	<input type="checkbox"/> GA Brunswick	<input type="checkbox"/> IN Terre Haute	<input type="checkbox"/> MO St Joseph	<input type="checkbox"/> OH Cincinnati	<input type="checkbox"/> PR Toa Baja	<input type="checkbox"/> VI Kingshill	
<input type="checkbox"/> CA Fresno	<input type="checkbox"/> GA Dobbins AFB	<input type="checkbox"/> IN Indianapolis	<input type="checkbox"/> MO Whiteman AFB	<input type="checkbox"/> OH Columbus	<input type="checkbox"/> RI Coventry	<input type="checkbox"/> VT Burlington	
<input type="checkbox"/> CA March ARB	<input type="checkbox"/> GA Garden Gty	<input type="checkbox"/> KS Salina	<input type="checkbox"/> MS Gulfport	<input type="checkbox"/> OH Mansfield	<input type="checkbox"/> RI N Smithfield	<input type="checkbox"/> WA Camp Murray	
<input type="checkbox"/> CA Moffett Field	<input type="checkbox"/> GA Marietta	<input type="checkbox"/> KS Topeka	<input type="checkbox"/> MS Meridian	<input type="checkbox"/> OH Port Clinton	<input type="checkbox"/> RI Quonset	<input checked="" type="checkbox"/> WA Fairchild AFB	
<input type="checkbox"/> CA North Highlands	<input type="checkbox"/> GA Robins AFB	<input type="checkbox"/> KS Wichita	<input type="checkbox"/> MS Jackson	<input type="checkbox"/> OH Springfield	<input type="checkbox"/> SC McEntire ANG	<input type="checkbox"/> WI Madison	
<input type="checkbox"/> CA Port Hueneme	<input type="checkbox"/> GA Savannah	<input type="checkbox"/> KY Louisville	<input type="checkbox"/> MT Great Falls	<input type="checkbox"/> OH Swanton	<input type="checkbox"/> SD Sioux Falls	<input type="checkbox"/> WI Milwaukee	
<input type="checkbox"/> CA Sacramento	<input type="checkbox"/> GU Anderson AFB	<input type="checkbox"/> LA Alexandria	<input type="checkbox"/> MT Helena	<input type="checkbox"/> OH Zanesville	<input type="checkbox"/> TN Chattanooga	<input type="checkbox"/> WI Volk Field	
<input checked="" type="checkbox"/> CA San Diego	<input checked="" type="checkbox"/> HI Hickam AFB	<input type="checkbox"/> LA Hammond	<input type="checkbox"/> MT Malmstrom AFB	<input type="checkbox"/> OK Ft Sill	<input type="checkbox"/> TN McGhee Tyson	<input type="checkbox"/> WV Charleston	
<input type="checkbox"/> CA Van Nuys	<input type="checkbox"/> HI Hilo	<input type="checkbox"/> LA New Orleans	<input type="checkbox"/> NC Charlotte	<input type="checkbox"/> OK Oklahoma City	<input type="checkbox"/> TN Memphis	<input type="checkbox"/> WV Martinsburg	
<input type="checkbox"/> CA Vandenberg AFB	<input type="checkbox"/> HI Kahului	<input type="checkbox"/> LA Pineville	<input type="checkbox"/> NC New London	<input type="checkbox"/> OK Tulsa	<input type="checkbox"/> TN Nashville	<input type="checkbox"/> WY Cheyenne	
<input type="checkbox"/> CO Buckley AFB	<input type="checkbox"/> HI Kapolei	<input type="checkbox"/> MA Milford	<input type="checkbox"/> ND Fargo	<input type="checkbox"/> OR Klamath Falls	<input type="checkbox"/> TX Austin		

AIR NATIONAL GUARD LOCATIONS



ANG Officer Application Statement of Understanding		Applicant Initials
I, Johnny Applicant , understand that I am applying for a traditional, part-time officer position in the Air National Guard (ANG), and that application does not guarantee selection as an officer. Upon arrival of my application, my information will become available to the unit(s) that I have selected, and selection is accomplished at the unit level based on vacancies. I understand that the list of units I selected on the Worksheet will have access to my application upon approval, and I concur with this list. Selection at the unit level may include additional pre-qualification paperwork as well as possible interview(s) as the unit requires. I also understand that the full-time application process is separate from this application.		<i>JA</i>
If selected, I understand that I will be required to complete the application process with the Designated Officer Recruiter (DOR) for the unit/state of selection. This application is only a pre-qualification, and I understand that final approval will be made after a complete application is submitted to NGB/AIPOP through the DOR. I also understand that my initial medical determination is only a pre-qualification, and that I will still have to complete the medical processing, and during this time I could be found medically disqualified. I understand that if I am medically disqualified, that waivers are case by case, and are not guaranteed.		<i>JA</i>
I understand that my application will expire 24 months from the date of submission, and that several forms may have expired and will need to be accomplished again upon selection. I also understand that it is my responsibility to communicate my intention to renew my application with the DOR. In addition, I understand that once my application is pre-qualified and I am waiting for unit selection that it is my responsibility to communicate with the DOR any new law violations, changes in medical status, and changes of intention to become an officer in the ANG.		<i>JA</i>
I understand that travel pay is not authorized for inactive training which includes drill weekends, and I have considered this when making my unit selections.		<i>JA</i>
JBR ONLY: I understand that I am applying for Position Number: Leave blank	Unit Leave blank State Leave blank	Leave blank

Johnny Applicant
Applicant Name

Applicant Signature *Johnny Applicant*

Date 6/12/12

Designated O. Recruiter
DOR/ISR/JBR Name and Rank

DOR/ISR/JBR Signature *Designated O. Recruiter*

Date 6/12/12

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