

**FTNGD-OS/CD ORDERS >29 DAYS
COVER LETTER (APPROVAL CHECKLIST)**

<p>-Service member (SM) reviews and completes items 1-15.</p> <p>-Employing organization S1 validates and submits complete packet as a single PDF document to CJTF distro via Website. Alternate Methods: Email c-apeffley@pa.gov, c-bdolan@pa.gov</p> <p>-CDO representative will validate submitted packets, set up interviews, and send selected applications to CDC for approve/disapprove.</p>
1. SM Rank and First & Last Name: _____
2. Position Title: _____ and Tour Request for FY _____
3. ETS/MRD: _____ Cannot be within 6 months of FTNGD-OS start date, unless waived by TAG.
4. Flagged: ___ YES or ___ NO SM cannot be under a suspension of favorable personnel actions.
5. Full-time Federal Employee (T5/T32): ___ YES or ___ NO If yes, attach a copy of FTNGD-OS Request Form. FTNGD-OS Request Form must be completely filled out and signed prior to approval.
6. Information Brief. SM reviews & signs, SM's MSC AO/alternate representative signs authorizing SM to perform orders >29 days, and employing organization representative signs validating packet, tour dates, and funding.
7. (ARMY only) DA Form 1058, Application for Operational Support. SM and unit complete (retained in OMPF). Accurate completion of block 19a. is required. -SM signs block 20. -Commander signs block 32b. -Records Custodian (Unit Administrator) signs block 33b verifying SM is medically fit, all admin data is correct, and the commander signed the form.
7a. (ARMY only) ARNG Form 1058-1, Approval Authority Determination. Only required for NGB Waivers (OS required for >18 years AFS/sanctuary or Separation Pay/31-day break).
8. NGB 23B, RPAS or Cedit Points Summary. SM verifies all service time is accurate. Confirming total active service (AS).
9. Orders Query (w/entire history). Last 31 day break: _____ (last day of break w/no orders to include, AT, MOB, Schools, etc.). Attach memo w/planned 31 day break if over 4 continuous years of AS. Required break prior to 5 years AS.
10. Individual Medical Record (IMR). SM meets retention standards of Chapter 3, AR 40-501:
11. PHA within 12 months of order start date _____ (date of last PHA)
12. HIV within 2 years of order start date _____ (date of last HIV)
13. Medical Readiness Code (MRC) _____ (1-4)
14. Permanent profiles with a 3 or 4 in PULHES must be adjudicated by either the MAR2 process or PDE the _____ (PULHES). Attach current permanent 3/4 DA 3349s, Physical Profiles, if applicable. SMs on temporary profile are not eligible for orders >29 days.
15. SM will inform his/her employing organization S1 immediately if a medical condition arises and contact the MSC Case Management team to address/document medical issues.
11. DA form 705 w/ HT & WT. SM has passing record ACFT or PFT and HT/WT within 6 months of order start date. _____ ACFT/PFT Date. _____ HT/WT Date.
12. Security Clearance Verification. _____ Date verified.
13. DD 369, Police Record Check.
14. DA 1506, Statement of Service. Only if applicable to determine active duty history, if no Orders Query and NGB 23B.
15. DA 5960 or AF 594 Authorization for BAH. Submitted by the unit/HRF/RRB/RTI/CD w/first pay
Application Reviewed: _____ Complete: ___ Incomplete: ___
CDC APPROVAL ONLY: ___ Approved ___ Not Approved
Name, Signature, & Date: _____