

**ENLISTED PERSONNEL ACTION REQUEST**

DD MMM YY

34

SSN: 000-00-0000

FROM: RATE(SW/AW) LAST, FIRST MIDDLE, USN  
 TO: COMMANDER, NAVY PERSONNEL COMMAND (PERS-000XX0)  
 VIA: COMMANDING OFFICER, NAVAL SUPPORT ACTIVITY NORFOLK, VA  
 REF: (A) ENLISTED TRANSFER MANUAL, 0.00  
 ENCL: (1) IF APPLICABLE

NEC: 0000 / 0000

DUTY PHONE:  
 (DSN) 836-1845  
 (757) 836-1845

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TYPE DUTY	TOUR ASSIGNMENT	CHANGE OF RATE	EXTENSION/ REENLISTMENT	SCHOOL	STAR	SCORE	SPECIAL PROGRAMS
<input type="checkbox"/>	(TRANSFER, EXCHANGE OF DUTY, NEW CONSTRUCTION, ETC)						

REASON FOR REQUEST/ AMPLIFYING INFORMATION/OTHER:

UPON APPROVAL OF THIS REQUEST I WILL ACQUIRE NECESSARY OBLIGATED SERVICE?  YES  NO

IF COST TRANSFER IS NOT FEASIBLE, I WILL ACCEPT TRANSFER AT NO COST TO THE GOVERNMENT?  YES  NO

DO YOU HAVE ANY OTHER REQUESTS PENDING ACTION IN NMPC E. G., FLEET RESERVE, HUMS, SCHOOLS, ETC?  YES, EXPLAIN ON THE REVERSE SIDE.  NO

HAVE YOU PREVIOUSLY SUBMITTED THIS REQUEST?  YES, EXPLAIN ON THE REVERSE SIDE.  NO

**PRIVACY ACT STATEMENT:** The authority to request this information is contained in 5 USC 301 Departmental Regulations. The principal purpose of the information is to enable you to make known your desires for the various types of duty listed, or some other special assignment consideration. The information will be used to assist official and employees of the Dept. of the Navy in determining your future duty assignment. Completion of the form is mandatory except for duty and home phone numbers; failure to provide required information may result in delay in response to or disapproval of your request.

SIGNATURE:

NO.OF DEPNS: -00-	LOCATION OF DEPNS XXX	LOCATION OF HHG XXX	EDUCATION: 12/14/16	CITZ US	CLEARANCE/BASIS: SECRET / FINAL	DLAB: N/A
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DATE REPORTED: YYMMDD	PRESENT PRD YYMM	EAOS/EAOS AS EXTENDED YYMMDD / YYMMDD	SEX M/F	MILITARY SPOUSE:000-00-0000 <input type="checkbox"/> YES <input type="checkbox"/> NO
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LAST TWO EVALUATION (FILL-IN INDICATED BLOCK NUMBERS)

EVAL BLOCK	33	34	35	36	37	38	39	40
DDMMYY	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.00
DDMMYY	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.00

<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	ELIGIBLE FOR DUTY REQUESTED
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	HAS CLEAR RECORD (NO NJP) FOR PAST <u>24</u> MONTHS AS REQUIRED
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	MEETS SECURITY CLEARANCE REQUIREMENTS
<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	SECNAV FIND REQUIRED

FROM: COMMANDING OFFICER, NAVY SUPPORT ACTIVITY NORFOLK, VA DATE: DD MMM YY  
 TO: COMMANDER, NAVAL PERSONNEL COMMAND (PERS-000XX0) CCC (DSN) 836-1845  
PHONE: (757) 836-1845

USE REVERSE IF COMMENT DESIRED:

MEMBER'S UIC: 00000 SIGNATURE OF COMMANDING OFFICER: J. M. MCDONNELL, CAPTAIN, USN

FROM: COMMANDER, NAVY PERSONNEL COMMAND (PERS-000XX0)

TO: RATE(SW) LAST, FIRST MIDDLE, USN

VIA: COMMANDING OFFICER  
NAVAL SUPPORT ACTIVITY NORFOLK, VA  
7918 BLANDY ROAD, SUITE 100  
NORFOLK, VA 23551-2419  
ATTN: COMMAND CAREER COUNSELOR

ORIGINATORS RETURN ADDRESS

APPROVED

ORDERS WILL BE ISSUED FOR TRANSFER IN \_\_\_\_\_ TO UIC: \_\_\_\_\_.  
 AUTHORIZED TO EXTEND ENLISTMENT TO \_\_\_\_\_.  
 AUTHORIZED TO REENLIST FOR \_\_\_\_\_ YEARS.  
 PRD ADJUSTED TO \_\_\_\_\_ BY SEPAC. (ENSURE MEMBER HAS OBLISERV)  
 WILL BE ASSIGNED ON A TEMADDINS/PCS BASIS TO \_\_\_\_\_ SCHOOL:  
 CLCVN \_\_\_\_\_ MOS OBLISERV REQUIRED.  
OTHER:

DISAPPROVED (LETTER OF EXPLANATION FORWARDED: \_\_\_\_\_)  
DATE

RETURNED WITHOUT ACTION:

NOT ELIGIBLE FOR DUTY REQUIRED.  
 REQUEST NOT IN COMPLIANCE WITH \_\_\_\_\_.  
 OTHER (SEE ADDITIONAL INFO).

ADDITIONAL INFORMATION:

DATE:

SIGNATURE (By direction)

NMPC CODE

USE THIS SPACE FOR ADDITIONAL COMMENTS: