

TING - ENLISTED CHECKLIST			
PRIVACY ACT STATEMENT			
AUTHORITY: NGR 614-1			
PURPOSE: To process separation actions for enlisted Servicemembers of the Hawaii Army National Guard.			
1. TO TAGHI, ATTN: NGHI-PER- ENL Kapolei, HI 96707-2150	2. FROM (Unit Name) DET 1, G CO, 1-189TH AVN REG	(UIC) WYQSG1	3. DATE (YYYYMMDD) 20260
PART I - SOLDIER DATA			
4. NAME (Last, First, Full Middle) [REDACTED]	5. RANK SGT	6. EMPLID [REDACTED]	7. STATUS IDT
8. MOS [REDACTED]			
9. PREFERRED EMAIL ADDRESS [REDACTED]@gmail.com	10. EXPIRATION TERM OF SERVICE (ETS) [REDACTED] 8	11. PAY ENTRY BASE DATE (PEBD) 2 [REDACTED]	
PART II - REQUESTED INFORMATION			
TYPE OF REQUEST Transfer to Inactive National Guard (TING)			
<u>NOTE:</u> All documents will be submitted as a single consolidated PDF file in order IAW the checklist. <u>Naming Convention:</u> TING_RANK FIRSTNAME LASTNAME_UIC			
Initial	PART III - REQUIRED DOCUMENTS		
MC	TING Checklist		
MC	SM's Request Memorandum Thru Chain of Command For TAG with requested effective date		
MC	DA Form 4856 - Developmental Counseling Form		
MC	Inactive National Guard Counseling Checklist		
MC	DA Form 4856 - Retention Counseling		
MC	Soldier Talent Profile		
MC	NGB Form 23B		
MC	Individual Medical Record - Current PHA within 15 Months		
MC	HIARNG G1 Outprocessing Checklist		
PART IV - CRITERIA FOR TING			
Voluntary Transfer to ING - NGR 614-1, para 2-1a: a. Soldiers in active status may request transfer to the ING for the following reasons. (1) Change of residence. (2) Incompatibility with civilian employment. (3) Temporary overseas or out-of-state residency for education, employment, or a missionary obligation. (4) Temporary medical disqualification, not due to line-of-duty injury, that can be corrected in less than one year. Both transfer to the ING and back to active status will require verification of medical status. Transfer to the ING is not authorized for injuries that occur while an ING Soldier is temporarily on active status on Annual Training (AT)/Active Duty Training (ADT) orders or at Annual Muster. (5) Pregnancy. (6) Valid reason for delay from entering on active duty with their unit when mobilized. (7) Released from active duty with a mobilized unit before the release of the unit from its mobilization status. (8) As an alternative to serving in the Individual Ready Reserve (IRR) of the United States Army Reserve (USAR) in order to complete the second portion (two, four, or five years) of the 6x2, 4x4, or 3x5 enlistment option, or of another residual commitment to serve in the Ready Reserve of the Army, after an initial period of service on active status with ARNG. Soldiers must execute a DA Form 4836 for the remaining period. (9) Leaving active status and eligible for and desires to maintain a connection with the ARNG in inactive status by extending term of service to be placed in the ING instead of being discharged. (10) For a reason other than those cited in this paragraph. A request under this subparagraph must be approved by TAG.			

DETACHMENT 5, COMPANY E, 189th AVIATION REGIMENT
103D TROOP COMMAND
1971 SANTOS DUMONT AVENUE
SCHOFIELD BARRACKS, HAWAII 96857-5016

NGHI-TRP-MHG (135)

26 March 2026

MEMORANDUM THRU

Commander, Det 1, Co G, 1-189th Aviation Regiment (NGHI-TRP-MHG), 1971 Santos
Dumont Ave, Schofield Barrack, Hawaii 96857-5016 CONCUR [REDACTED]

Commander, 103d Toop Command (NGHI-TRP-CO), 96-1210 Waihona Street, Pearl
City, Hawaii 96782-1997 CONCUR [REDACTED]

FOR The Adjutant General of Hawaii (NGHI-PER), 91-1227 Enterprise Avenue,
Kapolei, Hawaii 96707-2150

SUBJECT: Request for Voluntary Transfer to the Inactive National Guard (ING)

1. I, SGT [REDACTED], am requesting to be transferred to the ING of Hawaii as of 20260501. I am the Flight Paramedic of Det 5, Co E, 1-189th Aviation Regiment, 103 Troop Command. My current assignment data is:

- a. Unit UIC: WYQSE5
- b. Para/Lin: 9TMP/99
- c. PMOS/DMOS: [REDACTED]
- d. ETS: 20280318

2. This request is based on the provisions of NGR 614-1, paragraph 2-1a. I am requesting a transfer to ING due to my current childcare situation and the lack of available external support. [REDACTED]

[REDACTED] We do not have family members, friends, or any other support network able to assist with childcare. All childcare responsibilities fall solely on us. We have explored private childcare options; however, the cost exceeds our financial means. After accounting for essential living expenses such as housing, utilities, food, transportation, and other necessities, there is insufficient income remaining to cover childcare expenses without causing significant financial hardship. As a result, privately funded childcare is not a viable or sustainable option for our family. Due to the absence of outside support and prohibitive cost of childcare, we are unable to manage childcare responsibilities independently while maintaining financial stability. For these reasons, a transfer to ING is necessary.

Approval of this request would allow us to meet our child care needs while maintaining household financial stability. Without a transfer to Inactive National Guard, we are left with no practical alternatives.

3. I understand and agree to the following while a member of the ING:

- a. I will be available to report for State or Federal mobilization.
- b. I will be required to report for a specified annual muster day during each training year or fiscal year.
- c. I will be required to maintain a current periodic (performed annually) health assessment (see AR 40-501, paragraph 8-20).
- d. I will immediately report any changes to my current address and contact information (as set out below) to my unit commander or designated representative.
- e. I will immediately report to my unit commander or designated representative any change in status, such as physical condition or family situation, which could affect my availability for mobilization.

3. My current contact information is:

- a. Address: [REDACTED]
- b. Telephone number: 1 [REDACTED]
- c. Email address: [REDACTED]@army.mil or [REDACTED]@gmail.com

4. The point of contact for this memorandum is SGT [REDACTED] at 808-[REDACTED] or [REDACTED]@army.mil.

[REDACTED]
[REDACTED]
SGT, HIARNG
Flight Paramedic

DEVELOPMENTAL COUNSELING FORM

For use of this form, see ATP 6-22.1; the proponent agency is TRADOC.

PRIVACY ACT STATEMENT**AUTHORITY:** 5 USC 301, Departmental Regulations, 10 USC 3013, Secretary of the Army.**PRINCIPAL PURPOSE:** These records are created and maintained to manage the member's Army and Army National Guard service effectively, to document historically a member's military service, and safeguard the rights of the member and the Army.**NOTE:** For additional information, see the System of Records Notice A0600-8-104b AHRC, <https://dpcld.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570051/a0600-8-104b-ahrc/>.**ROUTINE USE(S):** There are no specific routine uses anticipated for this form; however, it may be subject to a number of proper and necessary routine uses identified in the system of records notice specified in the purpose statement above.**DISCLOSURE:** Disclosure is voluntary.**PART I - ADMINISTRATIVE DATA**

Name (Last, First, MI) [REDACTED]	Rank/Grade E-5	Date of Counseling 27-Jan-2026
Organization DET 1, G CO, 1-189TH AVN REG	Name and Title of Counselor [REDACTED]	

PART II - BACKGROUND INFORMATION**Purpose of Counseling:** (Leader states the reason for the counseling, e.g. Performance/Professional/Event-Oriented counseling, and include the leader's facts and observations prior to the counseling.)Approach: ☒ Non Directive ☐ Combined ☐ DirectiveType of Counseling: ☒ General Form ☐ Professional Growth ☐ Performance ☐ Event Oriented

Purpose: Event-Oriented Counseling

Statement of understanding regarding the impact on benefits and military service while in the Inactive National Guard (ING).

Additional counseling is provided in the ING Counseling Checklist.

PART III - SUMMARY OF COUNSELING

Complete this section during or immediately subsequent to counseling.

Key Points Discussion:

1. If the Service Member enlisted/reenlisted with a bonus: it may be suspended, terminated, and/or recouped.
BONUS: MC Yes No
2. If the Service Member received the Montgomery GI Bill, it cannot be used while in the ING and will be terminated if the service member does not re-affiliate with the ARNG or USAR in an active drilling status within 12 months (or 3 years if conducting missionary work).
3. Transfer into the ING can affect military service time and/or obligation time.
4. Discuss the purpose of Annual Muster.
5. Discuss the contents of the ING Counseling Checklist.
6. SGLI elections. Service Member is responsible to updating SGLI elections on SGLI Online Enrollment System (SOES). Service Member may accrue a debt if SGLI elections are not changed or updated.

OTHER INSTRUCTIONS

This form will be destroyed upon: reassignment (other than rehabilitative transfers), separation at ETS, or upon retirement. For separation requirements and notification of loss of benefits/consequences see local directives and AR 635-200.

Plan of Action (Outlines actions that the subordinate will do after the counseling session to reach the agreed upon goal(s). The actions must be specific enough to modify or maintain the subordinate's behavior and include a specified time line for implementation and assessment (Part IV below).

- Update my unit of any administrative changes.
- Update my unit of any physical condition/family situation changes.
- Update my SGLI elections.
- Contact Education Office regarding education benefits and/or incentives.
- Attend Annual Muster as required.

Session Closing: (The leader summarizes the key points of the session and checks if the subordinate understands the plan of action. The subordinate agrees / disagrees and provides remarks if appropriate.)

Individual counseled: ☒ I agree ☐ disagree with the information above.

Individual counseled remarks:

I acknowledge the following information and have read and understood NGR 614-1:

1. If I have a bonus, it may be either suspended, terminated, and/or recouped.
2. If I have Montgomery GI Bill, it may be terminated if I do not return from ING within one year (three years for missionary work).
3. ING time does not count towards military service time or obligation service time.
4. Contents discussed from the ING Counseling Checklist.
5. Service Member may accrue a debt if SGLI elections are not changed or updated.

Signature of Individual Counseled:

DATE (YYYYMMDD)

20260127

Leader Responsibilities: (Leader's responsibilities in implementing the plan of action.)

Signature of Counselor:

Date (YYYYMMDD)

20260127

PART IV - ASSESSMENT OF THE PLAN OF ACTION

Assessment: (Did the plan of action achieve the desired results? This section is completed by both the leader and the individual counseled and provides useful information for follow-up counseling.)

SIGNATURES

Note: Both the counselor and the individual counseled should retain a record of the counseling.

INACTIVE NATIONAL GUARD (ING) COUNSELING CHECKLIST

1. The following information is provided concerning your transfer to the Inactive Army National Guard (ING). As a member of the ING:

a. You are in inactive status. In inactive status you are not entitled to pay, not eligible for promotion, and not eligible to earn retirement points. (MC)
SM initials

b. You are subject to immediate involuntary mobilization in the event of Federal or State mobilization. (MC)
SM initials

c. You do receive longevity credit for basic pay purposes while in inactive status. (MC)
SM initials

d. You are required to report to a one-day annual muster with your unit of assignment. (MC)
SM initials

e. You are required to maintain a current periodic health assessment, performed annually per AR 40-501, paragraph 8-20. (MC)
SM initials

f. You are required to keep your unit commander or designated representative informed of any change in your home address, your e-mail address, or your home, work, or mobile phone numbers. (MC)
SM initials

g. You are required to keep your unit commander or designated representative informed of any changes in your status (such as physical status or family situation) that may affect your potential for future service as a mobilization asset. (MC)
SM initials

2. Official notice:

a. Your transfer to the ING, effective 1 May 2026, is based on the provisions of National Guard Regulation (NGR) 614-1, paragraph 2-1 (10). (MC)
SM initials

b. The reason for such transfer is: Child Care Support

3. Your SGLI terminates on the 120th day after separation from active status (assignment to the ING). Soldiers transferred into the ING are entitled to and can apply for part-time SGLI and VGLI coverage. See NGR 37-104-3 for entitlements and administrative processing. Additional guidance and cost information is provided on the Department of Veterans' Affairs Life Insurance web site:
<https://www.va.gov/life-insurance/options-eligibility> (MC)
SM initials

4. At any time you may request transfer from the ING to active status in the Army National Guard (ARNG). You may also request temporary transfer to active status in order to attend Annual Training (AT) or a military school. You will be temporarily transferred to active status if you are required to participate in an administrative board. You may not be temporarily transferred into active status in order to attend Inactive Duty Training (IDT) (i.e.: weekend drills). In order to be transferred to active status pursuant to your request you must meet the standards of existing ARNG retention policies, and your request must be approved by your unit commander and the chain of command. You may also request to be released from your ARNG commitment and transfer into the Individual Ready Reserve (IRR) of the United States Army Reserve (USAR). (MC)
SM initials

5. NGR 614-1 outlines the policy concerning the ING. If you have any questions concerning your transfer to the ING or your responsibilities while a member of the ING you should contact your unit commander or designated representative. If you believe that you have been inappropriately transferred to the ING you may request that the order transferring you to the ING be revoked. (MC)
SM initials

Counselor:



Service Member:



DEVELOPMENTAL COUNSELING FORM

For use of this form, see ATP 6-22.1; the proponent agency is TRADOC.

PRIVACY ACT STATEMENT**AUTHORITY:** 5 USC 301, Departmental Regulations, 10 USC 3013, Secretary of the Army.**PRINCIPAL PURPOSE:** These records are created and maintained to manage the member's Army and Army National Guard service effectively, to document historically a member's military service, and safeguard the rights of the member and the Army.**NOTE:** For additional information, see the System of Records Notice A0600-8-104b AHRC, <https://dpcl.dod.mil/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570051/a0600-8-104b-ahrc/>.**ROUTINE USE(S):** There are no specific routine uses anticipated for this form; however, it may be subject to a number of proper and necessary routine uses identified in the system of records notice specified in the purpose statement above.**DISCLOSURE:** Disclosure is voluntary.**PART I - ADMINISTRATIVE DATA**

Name (Last, First, MI)

Rank/Grade

Date of Counseling

E-5

27-Jan-2026

Organization

Name and Title of Counselor

DET 1, G CO, 1-189TH AVN REG

PART II - BACKGROUND INFORMATION**Purpose of Counseling:** (Leader states the reason for the counseling, e.g. Performance/Professional/Event-Oriented counseling, and include the leader's facts and observations prior to the counseling.)Approach: ☒ Non Directive ☐ Combined ☐ DirectiveType of Counseling: ☒ General Form ☐ Professional Growth ☐ Performance ☐ Event Oriented

ETS: 20280318

PEBD: 20190319

Date last APFT/Pass or Fail:

DMOSQ: Go

Duty Position Holder: Excess

Eligible to extend (Yes / No): No

Reason (FLAG): N/A

Time in Service (TIS) at current ETS:

MOS/Position Title: 68W

Weight/Date: Go/20240908

BRS (Y/N) Y

T-Shirt Size:

PART III - SUMMARY OF COUNSELING

Complete this section during or immediately subsequent to counseling.

Key Points Discussion:

1. Discuss The Army National Guard (ARNG) Selected Reserve Incentive Program (SRIP) Policy for Fiscal Year (FY) 2025, (ARNG-HRZ Policy #25-01). MUST meet eligibility requirements.

a. The Reenlistment/Extension Bonus (REB) may be offered as one of the following:

i. REB \$10K, minimum 3-years, DMOSQ, pay grades E-3 through E-7

1) Less than 13 years and one-month time in service on contract start date if enrolled in the High 36 Retirement System (Legacy)

2) No less than 5 years and no more than 6 years and 1 month time in service on contract start if enrolled in the Blended Retirement System (BRS). All Soldiers who enlisted after 01JAN18 are automatically enrolled into the BRS Program

3) Payment is processed lump sum upon contract start date.

[SM Confirms Information (Initials): MC]

b. MOS Conversion Bonus (MOSCB) may be offered as one of the following

i. MOSCB \$10K, less than 12 years TIS on contract start date, fill a vacant position that is less than 90% filled at the State level, pay grades E-6 and below, MOSQ within 24 months of contract signature date, minimum 3-years (term begins when the MOS is awarded), payment is processed in a lump sum upon verification of award of MOS.

[SM Confirms Information (Initials): MC]

c. Student Loan Repayment Program (SLRP) may be offered as follows:

i. Prior Service up to \$50K (inclusive of interest), must extend for 6 years, must be DMOSQ, pay grade up to E7, less than 16 years of service at time of contracting, and all prior service periods served under Honorable conditions (General under Honorable Conditions ineligible). Must have authorized preexisting loans and a GIMS SLRP pre-approved memo when extending. Individuals previously discharged or released from active duty or military service in an active status based on a determination of misconduct, substandard duty performance, or moral or professional dereliction are not authorized.

[SM Confirms Information (Initials): MC]

d. MGIB Kicker bonus:

i. \$350 Re-Enlistment/Extension (RE), Reenlist or extend DMOSQ grade E7 or below, may extend any time after completing three continuous years of service in the ARNG, but prior to completing 14 total years of service, ASVAB 50 or above (Cat I-III A), and may only contract for a Kicker once in their career. Must extend for 6 years to be eligible for MGIB kicker bonus.

[SM Confirms Information (Initials): MC]

2. Discuss Factors affecting decision to ETS vs. extend. Address concerns.

OTHER INSTRUCTIONS

This form will be destroyed upon: reassignment (other than rehabilitative transfers), separation at ETS, or upon retirement. For separation requirements and notification of loss of benefits/consequences see local directives and AR 635-200.

☐ Family ☐ Employment ☐ Education ☐ Leadership ☐ Camaraderie ☐ Esprit de corps ☐ Training ☐ Travel

3. Discuss Features of membership in the Army National Guard.

☐ Low cost life, health, and dental insurance ☐ Free health insurance at age 60 for Retirees (Tricare for Life) ☐ Retirement income at age 60 (or earlier) ☐ Transferability of GI Bill benefits to family members ☐ Thrift Savings Plan ☐ 100% tuition reimbursement ☐ Federal Tuition Assistance ☐ Student Loan Repayment Program ☐ MGB Kicker ☐ Free 24-hr tutoring for Soldier and family ☐ VA home loans ☐ College grants ☐ Monthly/annual income

4. Discuss the following regarding individual's career development.

☐ Assessment of leadership skills ☐ Leadership potential ☐ Potential for promotion ☐ MOS qualification/proficiency ☐ Significance of NCO/E4 Evaluation Reports ☐ NCO Professional Development courses ☐ Correspondence courses ☐ Additional Duty Appointments ☐ Weight control ☐ APFT score ☐ Weapons qualifications ☐ Promotion points ☐ OCS/WOC opportunities ☐

5. Interstate Transfer (IST):

a. This is when a Soldier is relocating to another state to reenlist into the ARNG/ARNGUS of the new state BEFORE moving to that state. The effectiveness of the interstate transfer process requires that Soldiers inform their units when they plan to move. This will allow coordination between the losing and gaining state IST coordinator. Soldiers are not authorized to IST if they are currently in the medical board process, flagged for ABCP, within 4 months of ETS, have 9 or more unexcused absences within the preceding 12 months, no current ACFT, and if the Soldier is enrolled in the Army Substance Abuse Program (ASAP). Once the Soldier leaves the State, the Soldier has 30 days to notify the losing State of their new address. The Soldier is required to report to the gaining unit by the date specified on the NGB Form 22-5, part III. If the Soldier fails to report by the established date, the IST transfer order will be revoked and the Soldier will be processed for separation.

6. Inactive National Guard (ING):

a. The ING is designed for active status Soldiers who are unable to perform their required duties for some limited time, and for Soldiers who are eligible to maintain a connection with the ARNG upon leaving active status. Reasons to transfer into the ING status are, change of residence, incompatibility with civilian employer, temporarily overseas or out-of-state residency for education, employment, or a missionary obligation, Temporary medical disqualification, not due to line-of-duty injury, that can be corrected in less than one year, or pregnancy. Soldiers who have a remaining active status obligation and who are expected to return to active status may transfer to the ING for a period of one year or less. (Temporary assignment to the ING for a period of up to three years is permissible for the purposes of completing religious missionary programs.) Soldiers who leave active status with or without a remaining MSO and who are eligible and desire to maintain a connection with the ARNG may transfer to the ING. Provided the Soldier is otherwise qualified, continues to extend their enlistment in the ING, remains a mobilization asset, and complies with the requirements of ING membership, a Soldier may remain in the ING until attaining the mandatory retirement age. There is no restriction on the number of years that a Soldier may remain in the ING.

7. Individual Ready Reserve (IRR):

a. The Ready Reserve of the Army is comprised of military members of the ARNGUS and USAR, organized in units or as individuals, and liable for order to active duty in time of war or national emergency. The military service obligation incurred by completion of the oath of enlistment on an enlistment or reenlistment agreement. Contractual and statutory service may run concurrently. The Selected Reserve contractual term of service is that portion of a military service obligation that is to be served in a unit of the Selected Reserve. Example: The 6X2 enlistment option requires that 6 years be served in a unit of the Selected Reserve and the remaining 2 years be served in the IRR.

8. Other points of discussion included:

☐ Undecided ☐ Pursue OCS ☐ Pursue WOC ☐ GT Improvement Course

Plan of Action (Outlines actions that the subordinate will do after the counseling session to reach the agreed upon goal(s). The actions must be specific enough to modify or maintain the subordinate's behavior and include a specified time line for implementation and assessment (Part IV below).

1. Soldier will Extend current enlistment for _____ years.

2. Soldier would like to Extend but is not eligible to extend without approved waiver due to: (Circle all that apply: [APFT flag] [Weight flag] [Adverse Action flag] [Medical issue] [N/A]) that precludes him/her from taking or passing ACFT.

3. Soldier will ETS for the following reason(s): _____.

4. Soldier will Retire: (Circle what applies to Soldier: [No].

5. Soldier is Undecided (Circle what applies to Soldier: [No], because: _____.

6. Soldier is requesting to IST (Circle what applies to Soldier: [No], to _____, because _____.

7. Soldier is requesting to be put into the ING status (Circle what applies to Soldier: [Yes] , because of child care support.

8. Soldier is requesting to be put into the IRR status (Circle what applies to Soldier: [No], because _____.

9. Soldier is requesting to pursue: (Circle all that apply: [N/A].

Potential comments, issues, concerns, or problems:

Note: Both the counselor and the individual counseled should retain a record of the counseling.

Cell Phone Number: [REDACTED]

Personal Email: [REDACTED]@gmail.com

Session Closing: *(The leader summarizes the key points of the session and checks if the subordinate understands the plan of action. The subordinate agrees / disagrees and provides remarks if appropriate.)*

Individual counseled: ☒ I agree ☐ disagree with the information above.

Individual counseled remarks:

Signature of Individual Counseled:

[REDACTED]

DATE (YYYYMMDD)

20260127

Leader Responsibilities: *(Leader's responsibilities in implementing the plan of action.)*

Signature of Counselor:

[REDACTED]

Date (YYYYMMDD)

20260127

PART IV - ASSESSMENT OF THE PLAN OF ACTION

Assessment: *(Did the plan of action achieve the desired results? This section is completed by both the leader and the individual counseled and provides useful information for follow-up counseling.)*

SIGNATURES

Counselor:

Individual Counseled:

Date of Assessment (YYYYMMDD):

Note: Both the counselor and the individual counseled should retain a record of the counseling.



Basic Data

NG

SGT

SA

Date of Birth:

Birth Country:

Country of Citizenship:

Sex:

Race:

Ethnic Group:

Height:

Weight:

Religion:

Marital Status:

of Dependents (Adults/Children):

Home Address:

ROMCATHC

Job Code P/S/A:

SQI P/S (A):

ASI P/S (A):

PDSI:

E68W//

Non-Deployable

Readiness

MRC Code:

MRC Reason:

SFPA FLAGS

Restriction	Code	Begin Date	End Date

ELIGIBILITY FLAGS

Category	Restriction	Code	Begin Date	End Date

Skills 0 Self-Professed

PROFESSIONAL LICENSES		PROFESSIONAL CERTIFICATIONS		ATTRIBUTES (SELF-PROFESSED)		
License	Expiration Date	Certification	Certified Date	Attribute	Rating	Date

DEFENSE LANGUAGE PROFICIENCY TEST (DLPT)				LANGUAGES (SELF-PROFESSED)			
Language	Listening	Reading	Speaking	Language	Listening	Reading	Speaking

HOBBIES / INTERESTS (SELF-PROFESSED)				SELF STUDY (SELF-PROFESSED)			
Hobby / Interest	Genre	Proficiency	Date	Self Study	Genre	Proficiency	Date

Career Mapping



Experience

DEPLOYMENTS

DROS: ---

DEROS: ---

CBT: 0

OPN: 0

RES: 0

Dwell Start: ---

Dwell Duration: 83Mo 15D

MILITARY EXPERIENCE: DEPLOYMENTS / ASSIGNMENTS

Asgt	From	# Months	UIC	Organization	Station	Location	Comd	Duty Title	MOS
Current	20260105	0	WYQSE5	DET 5, CO E 1ST BN 189 AVN RGM	WAHIAWA	HI	NG	FLIGHT PARAMEDIC NCO	E68W
1st Prev	20230913	28	WYQSG1	DET 1, CO G 1ST BN 189 AVN RG	WAHIAWA	HI	NG	#2 FLIGHT PARAMEDIC	E68W

CIVILIAN WORK EXPERIENCE (SELF-PROFESSED)

ADDITIONAL DUTIES (SELF-PROFESSED)

Employment	Job Title	Start Date	End Date	Duration	Duty Title	Start Date	End Date

AWARDS

BADGES

TABS

Award	Count	Badge	Count	Tab
ARMY ACHIEVEMENT MEDAL	1			
ARMY RESERVE COMPONENTS ACHIEVEMENT MEDAL	1			
NATIONAL DEFENSE SERVICE MEDAL	1			
ARMED FORCES SERVICE MEDAL	1			
NONCOMMISSIONED OFFICERS PROF DEV RIBBON	1			
ARMY SERVICE RIBBON	1			

Knowledge

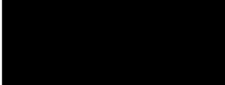
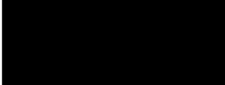
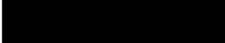
CIVILIAN EDUCATION

THESIS & CAPSTONE (SELF-PROFESSED)

MILITARY EDUCATION
MEL: BASIC LEADER COURSE / MES: GRADUATED

Degree	School	Location	Level	Graduation Date	Title	Year	Course Title	End Year	Mil Achvmt Cd
	CC,HI	ANI	HI USA				BAS LDR CRS	2024	

Basic Data

NG		Date of Birth:	
		Birth Country:	
		Country of Citizenship:	
		Sex:	
		Race:	
		Ethnic Group:	
SGT		Height:	
		Weight:	
		Religion:	
		Marital Status:	
		# of Dependents (Adults/Children):	
SA			
MRC3		Home Address...	

Job Code P/S/A: E68W//

SQI P/S (A):

ASI P/S (A):

PDSI:

Non-Deployable

Cultural Experience & Proficiency

0

Self-Professed

Date	Location	Type	Duration
---	---	---	---

Career Planning

LOCATION PREFERENCES (SELF-PROFESSED)			COUNTRY PREFERENCES (SELF-PROFESSED)		DUTY PREFERENCES (SELF-PROFESSED)	
Station	City	State	Country	Rank	Duty Name	Date Entered
----	-----	-----	-----	-----	-----	-----
ENDORSEMENTS (SELF-PROFESSED)				DESIRED FUTURE ASSIGNMENTS (SELF-PROFESSED)		
Endorsement		Endorser		Assignment		
-----		-----		Flight		
				Geographical Location 1		
				Instructor Position		
				See STP online for additional 2 rows.		

PV1	PV2	PFC	SPC	CPL	SGT	SSG	SFC	MSG	SGM
	20190319	20190401	20200919	20200919	20240224				

Service Data

ACCESSIONS DATA				MILITARY QUALIFICATIONS			
BASD: 20190319	Commissioning: —	Regular Ret Dt: 20430401					
Current PPN: —	Type of: —	Non-Reg Ret: 20390318		Evaluation	Date	Score / Hits	Passed
End Current: 20280318	Mo/Days Afcs: /	Current: —		DA FORM 7814 XM-17 PISTOL, MODULAR 1 OCT 20	20250518	21	MARKSMAN
BOSD: —	DIEMS: 20190319	ETS/ESA: 20280318		DA FORM 7801 M4A1 5.56MM CARBINE 1 OCT 20	20240504	30	SHARPSHOOTER
PEBD: 20190319	MRD/RCP: —	ADSO/SRR: —		Army Combat Fitness Test Information	20240908	481	Passed
ERRO/EXRRD: —							
ASVAB							
ASVAB/AFQT PERCENTILE: 75 ASVAB/AFQT DATE:							
	CL: —			GT: —			
	CO: —			MM: —			
	EL: —			OF: —			
	FA: —			SC: —			
	GM: —			ST: —			

Behavior

PROFESSIONAL GOALS (SELF-PROFESSED)			PERSONAL GOALS (SELF-PROFESSED)			FAMILY GOALS (SELF-PROFESSED)		
Goal	Goal Date	Actual Date	Goal	Goal Date	Actual Date	Goal	Goal Date	Actual Date
_____	_____	_____	_____	_____	_____	_____	_____	_____
ASSESSMENTS								
Assessment Type		Assessment Date		Proficiency Level		Composite Score		
_____		_____		_____		_____		

DRAFT ONLY - RETIREMENT ACCOUNTING STATEMENT - DRAFT ONLY

For use of this form, see AR 135-180; the proponent agency is DCS, G-1

DATE: 20260127

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: AR 135-180

PRINCIPAL PURPOSE: To provide members of the Reserve Components a detailed listing of retirement points earned in the previous completed anniversary years. To assist units and Soldiers in verifying retirement points earned during the annual review. The purpose of soliciting the DOB is for positive identification. Identify the individual and his/her service record. Determine creditable service for retirement and other benefits.

ROUTINE USE(S): The DoD Blanket Routine Uses may apply to this collection.

DISCLOSURE: Voluntary. However, failure to furnish information may result in denial of retirement.

N	RANK SGT	1 4	CUR SVC TYPE ARNG	NG STATE / COMPONENT NGDHI
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DIEMS 20190319		BASD	CUR AY 0318	DATE EST ELIGIBLE RET PAY 2039-03-18	HGH E5
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[illegible]

Points Not Credited Reasons:

X - Exceeded Year Limit

S - Exceeded IDT Limit

NIS - Member Not In Service

UNK - Service Unverified - Not Creditable

FOR OFFICIAL USE ONLY - Privacy Act Information

MRC	3		Physical Assessment Data	
Personnel			PULHES	
Name			PULHES Source	
DoDID #			Current Exam Date	G
Rank			Physical Category	
DOB			Height	
Sex			Weight	
UIC / Descr			Temp Profile	
Compo			Expiration Date	
Arrival Date			Flight Status	
Location			Duty Limiting Conditions (DLC)	
MACOM			DL1	R
Command			DL2	G
Duty Title / AOC	FLIGHT PARAMEDIC NCO / 68W		DL3	G
Dental			DL4	G
Dental Class	G		DL5	G
Panorex	G		DL6	G
Last Dental Exam			DL7	G
Vision			Pharmacy/Lab/Xray	
Vision Class	G		Required Medications on Hand	G
Vision Screening Date			Blood Type	
2PR Glasses	G		HIV Test Date	G
Mask Inserts	G		DNA	G
Mission Required Contact Lenses			Sickle Cell Screen	
Military Combat Eye Protection			Sickle Cell Screen Date	
Military Combat Eye Protection Inserts	G		G6PD Date	
Last Prescription Date on File			G6PD Status	
Hearing			Malaria Questionanaire	G
Hearing Class	G		Immunizations	
Hearing Readiness Status			IMM Profile	G
Audiogram Date			Annotated in Deployment Medical Record	
Triple or Single flange Earplugs Issued?	Y		Blood Type	
Equipment			Medication	
Hearing Aid	G		Medical Warning Tags	
Medical Warning Tags	G		Immunization Record	
Allergy / Conditions			Summary Sheet of Medical Problems	
Occupational Protection			Corrective Lens Prescription	
Respiratory	G		Deployment Health Assessments	
Hearing	G		Latest Date For	Stat
Vision	G		PRE	NA
			Post	NA
			PDHRA	NA

OUTPROCESSING CHECKLIST

Complete and Submit with Separation Packet			UNIT/UIC	Det 1, G Co, 1-189TH AVN			
LAST NAME		FIRST NAME		RANK	SGT		
ADDRESS			CONTACT PHONE				
MILITARY EMAIL			COMMMANDER				
CIVILIAN EMAIL			REASON FOR OUTPROCESSING	ING			
*UNIT READINESS REMOVE SOLDIER INFORMATION FROM UNIT ALERT ROSTER ^{BH} INITIALS							
UNIT SUPPLY SERGEANT							
PLEASE ANSWER THE FOLLOWING QUESTIONS:			YES	NO	N/A	REMARKS	
1	Individual OCIE turn in / clear / transfer in ISM (Hand Receipt)		CL				
	Provide SM with OCIE record (keep supply copy)		CL				
	Turn in Weapon / Mask		CL				
	Clear all temporary Hand Receipts (If any)		CL				
	Return facility Key(s) (if any)				CL		
	Turn in lock and clear assigned OCIE locker		CL				
Supply SGT Name/Signature: _____							
UNIT TRAINING NCO							
PLEASE ANSWER THE FOLLOWING QUESTIONS:			YES	NO	N/A	REMARKS	
2	Provide Soldier's Training Records (ie 705s / DA 5500_DA 5501)		ATP				
	Provide SM with driver training records and manual DA 348				ATP		
	Close / Clear out all DTS / GTC pending issues		ATP				
	Obtain Government Travel Card (if issued)		ATP				
Training NCO Name/Signature: _____							
UNIT READINESS NCO							
PLEASE ANSWER THE FOLLOWING QUESTIONS:			YES	NO	N/A	REMARKS	
3	Close / Clear any pending pay issues (IDT, RST, RMA, Orders, Bonus, GI Bill transfer obligation, leave cash-out, BRS-CP)		BH				
	Clear and process any pending LODs		BH				
	Obtain CAC Card (Discharge SM only)				BH		
	Request NGB 22 through BN S1/Sep Units (Discharge SM only)				BH		
	Provide Individuals Admin records from iPERMS (Hardcopies) OR Create DS Login in iPERMS (Discharge SM only)				BH		
	Close out evaluations and updated in iPERMS/IPPSA		BH				
	Any other pending Admin due outs - ASCO / FLAGS		BH				
	Notification email to G6/DCSIM to remove SM O365 and RCAS access (E5 and above only)		BH				
	Remove SMs in any Additional Duty Memorandums		BH				
	Access Debrief and close out any Security pending issues - contact Unit Security Manager		BH				
	Close / Clear any MISC pending actions - specify under "remarks"		BH				
	Readiness NCO Name/Signature: _____						

Good Luck on your Future Endeavors

Soldier / Print Name

First Sergeant / Print Name

Commander / Print Name

Soldier's Signature / Date

First Sergeant's Signature / Date

Commander's Signature / Date