			RSONNEL ACTION		900AW3042			
	For use of this form		6 and DA PAM 600-6-21; the propo	1000	gency is O	OCSPER		
			RED BY THE PRIVACY ACT OF 1	974				
AUTHORITY: PRINCIPAL PURPOSE:	Title 5, Section 3012; Title 10, USC, E.O. 9397. Used by solider in accordance with DA PAM 600-8-21 when requesting a personnel action on his/her own behalf (Section III).							
ROUTINE USES:	To initiate the processing of a personnel action being requested by the soldier.							
DISCLOSURE	Voluntary. Failure to provide social security number may result in a delay or error in processing of the request for personnel action.							
THPU (Include 20° Code)  Cdr, Group/Battallion Cdr, RRC/Division		Commander, ATTN: AHB I Reserve W	2. TO (Include ZIP Code) Commander, HRC-St. Louis ATTN: AHRC-ARE I Reserve Way St. Louis, MO 63132		FROM (Include ZIP Code) Current Unit of Assignment			
		SECTION	I - PERSONAL IDENTIFICATION	•				
4. NAME (Last, First, MI) DOE, MARIE J.		5. 4 SSC	5. GRADE OR RANKPMOSIAGO SSG/42A3O		6. SOC		DAL SECURITY NUMBER 123-45-6789	
		SECTION II - 0	OUTY STATUS CHANGE (AR 600	8-6)				
7. The above soldier's o	tuty status is change			nours.			_ to	
			REQUEST FOR PERSONNEL ACT	KOIM				
	I request the following action: (Check as appropriat  [Service School (Enlight)]   Se				Identification Card			
			Special Forces Training/Assignment On-the-Job Training (Enf only)		Identification Tage			
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<ol> <li>SIGNATURE OF SOLI Soldier's Signature</li> </ol>					10. DATE (YYYYMMOD)			
	SECTION IV - R	EMARKS (Apolio	s to Sections III. III. and V) (Conti	nue on	sequerate a	sheet?		
5. Current HT/WT: 6. Security Clearance 7. Duty Position Title 8. Home address and	mobilized or deploy Date of last /MOS: duty phone: the ATRRS prerec e (circle). You will ument Travel Card	ed: Yes/No II APFT P  puisites for enrol be notified if re Yes/No (circle		profile	: Temp/P	'ermanen	ng: Y t (circ	es No le)
11. I certify that the dut			TEFICATION/APPROVALIDISAPP ne request for personnel action (S			ned herei	n -	
HAS BEEN VERIFI			RECOMMEND DISAPPROV	AL [	IS APPR	ROVED		DISAPPROVED
12. COMMANDERIAUTHORIZED REPRESENTATIVE Local Unit Commander's Signature Block			SIGNATURE al Commander or Designated R	ep Onl	y .	14. DATE	2.000	YYMMDO)

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