

Colonel/Lieutenant Colonel Command Assignment Selection Board Worksheet

(For use of this form see USARC Reg 140-5; the proponent agency is DCSPER)

PRIVACY ACT STATEMENT

AUTHORITY: Title 10, U.S. Code Annotated, Sections 3012 and 3013. **PRINCIPAL PURPOSE:** To provide information essential to select candidates to fill U.S. Army Reserve position vacancies in the ranks of Lieutenant Colonel and Colonel. **ROUTINE USES:** To provide selection board members with a synopsis of pertinent qualifications and to compile the list of Official Military Personnel Folders that the board will require. **EFFECT OF FAILURE TO PROVIDE REQUESTED INFORMATION:** Furnishing this information is voluntary, but failure to do so may delay or prevent assignment of the respondent to a command position in the rank of Lieutenant Colonel or Colonel.

Section I. INDIVIDUAL OFFICER COMPLETE

NAME: _____ SSN: _____
(Last, First, MI)

* RANK: _____ DOR: _____ BR & AOC: _____ MRD: _____ DOB: _____

CURRENT DUTY ASSIGNMENT: _____
(Title, Unit, MSC/IRR/IMA)

ASSIGNMENT PREFERENCES

Mileage from my home address to the positions/locations is listed below. I will be available to participate in all administrative and Multiple Unit Training Assemblies (MUTA), regardless of distance.

UNIT	LOCATION	MSC	MILEAGE	MODE OF TRANS	BR & AOC
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____

HOME ADDRESS: _____

BUSINESS TELEPHONE #: _____ HOME TELEPHONE #: _____

E-MAIL ADDRESS: _____

(SIGNATURE/DATE)

* Do not include "(P)" unless you are currently listed on a promotion selection list.

Section II. UNIT COMMANDER COMPLETE *(or records custodian if unit commander applying or unavailable)*

DATE LAST PHYSICAL EXAM: _____ PULHES: _____

DATE LAST APFT: _____ *(Check one)* PASS FAIL PROFILE *(Enter date)* _____

CURRENT HEIGHT: _____ WEIGHT: _____ MAX ALLOWABLE WEIGHT IAW AR 600-9: _____

MEETS BODY FAT STANDARDS: *(Check one)* YES NO NA

I CERTIFY THAT I HAVE PERSONALLY VERIFIED ALL INFORMATION CONTAINED HEREIN:

(SIGNATURE/DATE)

(TYPED NAME/GRADE/TITLE)