

AGR Application Checklist

CHECK

1. AGR Consideration Memo (AGR only)
NGB 34-1 (M-DAY only)
2. Exception To Policy (AGR only): If you do not meet a requirement for the job, you must submit an ETP with COC signatures to be considered.
3. MEDPROS (IMR): (All applicants) PHA within 1 year, HIV within 2 years
4. SOLDIER RECORD BRIEF (SRB): All Soldier's race, ethnicity, and gender must be redacted from all SRB(s). These changes will help ensure that selection boards are as fair and impartial as possible. The only authorized record brief is the one not showing diversity information.
*if your SRB does not show your ASVAB scores, attach DD form 1966
**if you have taken an ASVAB re-test, please include the results
5. DA 705 / DA 3349 / Commanders statement that SM is not on weight control program (All applicants)
6. OER/NCOER: (All applicants) Last 4. If missing, include a MFR with explanation
*Letter of recommendation for E4 or Officer with no OERs
7. Security Clearance Verification Memo (All applicants)
8. NGB form 23: (M-DAY only) Retirement Points Statement
9. DD form 369 (M-DAY only): Police record check, less than six months old
*If applicable, any and all violation must be submitted with dispositions
**Non RRC AGR must submit if applying for a Recruiting and Retention Job
10. HRR Form 600: POSTA Questionnaire
*AGR that are not currently in Recruiting and all M-DAY must submit if applying for a Recruiting and Retention Job
11. **Upload all documents in the above order to <https://ftsmcs.ngb.army.mil/protected/>**
12. **Delete all documents that do not pertain to your application before submitting**
13. **Do not upload the job announcement or checklist with the packet**
14. **Contact AGR branch if you have any questions ng.la.laarng.mbx.agr-branch@mail.mil**
15. **AGR Branch is not the QC'ing entity, packets will be sent to the unit as is**
16. **If any information that affects the SM being qualified for the job is left out, SM will be disqualified**



MEMORANDUM FOR NGLA-JPM-HA, ATTN SFC Jonathan Smith, 6400 St. Claude Ave., Jackson Barracks, New Orleans, LA 70117

SUBJECT: Notification of interest in AGR vacancy announcement

1. I want to formally announce my interest in the above mentioned AGR vacancy.

- | | |
|----------------------|------------------------|
| a. Name: | Grade: |
| b. SSN: | Unit Assigned: |
| c. Current Duty MOS: | Current Duty Position: |
| d. Address: | |
| e. Phone Number: | |
| f. HOR: | |

2. Below is a listing of my past AGR positions and units starting with the most recent.

- a.
- b.
- c.
- d.
- e.
- f.
- g.

3. Below is a listing of all MOS I have obtained:

4. The POC is the undersigned at

5 Encls

1. IMR
2. SRB
3. DA 705 & HT/WT statement
4. NCOER (4)
5. Security Clearance Verification





MEMORANDUM THRU

FOR Office of the Adjutant General, JFHQ-LA, ATTN: NGLA-JPM-HA, Jackson Barracks, New Orleans, LA 70117

SUBJECT: REQUEST EXCEPTION TO 36/24 MONTH STABILIZATION POLICY:

1. The purpose of this memorandum is to request an exception to the 36/24 Month Stabilization Policy, as stated in the LAARNG AGR Enlisted Career Management Policy, dated 01 November 2020. This will allow me an opportunity to apply for the below vacant position.

VA number:
Job title:

Closing date:
Unit:

2. Justification for this request is based on the following:

- a. Does Soldier otherwise meet the requirements?
- b. Reason(s) the Soldier is requesting a waiver.

3. The chain of command recommends the below for the request provided by the Soldier. (sign beside the recommendation)

BN:
CONCUR

BDE:
CONCUR

NON-CONCUR

NON-CONCUR

4. The POC for this matter is the undersigned at

APPLICATION FOR ACTIVE GUARD/RESERVE (AGR) POSITION

The proponent agency is ARNG-HRH. The prescribing directive is NGR (AR) 600-5 / ANGI 36-101

PRIVACY ACT STATEMENT**AUTHORITY:** Title 32 USC 502(f), AR 135-18, NGR (AR) 600-5, ANGI 36-101.**PRINCIPAL PURPOSE:** To provide information for use in determining eligibility/qualifications for Active Guard/Reserve (AGR) positions. A copy will be provided to the applicant. The original will be maintained by the human resources office for State records. For organizational use only.**ROUTINE USES:** None.**DISCLOSURE:** Voluntary, however if not provided you will not be considered for the AGR program.

POSITION ANNOUNCEMENT #	POSITION TITLE		
NAME <i>(Last, First, Middle)</i>			DATE OF BIRTH <i>(yyyymmdd)</i>
CURRENT HOME ADDRESS <i>(Street, City, State, Zip Code)</i>			HOME PHONE OFFICE PHONE
DATE OF ENLISTMENT <i>(Enlisted)</i>	GRADE	MOS/SSI/AFSC	ETS DATE
DATE OF FEDERAL RECOGNITION <i>(Officer/WO)</i>	GRADE	BRANCH	MRD DATE
SECURITY CLEARANCE			

SECTION I - EDUCATION AND SPECIAL QUALIFICATIONS1. COLLEGE OR UNIVERSITY *(Accredited Colleges only, attach separate sheet(s) if necessary.)*

Name, City & State	Date From	Date To	Degree Program	Credit Hours	Quarter/Semester
Chief Undergraduate Subject					
Chief Graduate Subject					

2. OTHER SCHOOLS OR TRAINING *(Vocational, Trade or Business)*

Name, City & State	Date From	Date To	Course Title	Hours Completed

3. SKILLS AND QUALIFICATIONS *(Examples - Special skills and qualifications, word processing speed (WPM), certifications on wheel and track vehicles, etc. Also list any licenses or certificates held (RN, Pilot, CPA), etc.)***SECTION II - EMPLOYMENT HISTORY**

May we contact your present employer regarding your character, qualification, and record of employment?

(A "NO" answer will not affect your consideration for employment.)

CHECK ONE: YES NO

1. NAME AND ADDRESS OF CURRENT EMPLOYER	DATES EMPLOYED		AVERAGE HRS. PER WEEK
	FROM	TO	
TITLE OF POSITION	IMMEDIATE SUPERVISOR & PHONE NUMBER	NUMBER OF EMPLOYEES YOU SUPERVISED	
TYPE OF BUSINESS	YOUR REASON FOR LEAVING		
DESCRIPTION OF WORK <i>(Describe your specific responsibilities and accomplishments)</i>			

SECTION II - EMPLOYMENT HISTORY (Continued)

OTHER EMPLOYMENT

May we contact this employer regarding your character, qualification, and record of employment?
(A "NO" answer will not affect your consideration for employment.)

CHECK ONE: YES NO

2. NAME AND ADDRESS OF PRIOR EMPLOYER	DATES EMPLOYED		AVERAGE HRS. PER WEEK
	FROM	TO	

TITLE OF POSITION	IMMEDIATE SUPERVISOR & PHONE NUMBER	NUMBER OF EMPLOYEES YOU SUPERVISED
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TYPE OF BUSINESS	YOUR REASON FOR LEAVING
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DESCRIPTION OF WORK *(Describe your specific responsibilities and accomplishments)*

SECTION III - MILITARY HISTORY

1. MILITARY SERVICE *(Start with most recent service and show changes in grade and duty in reverse chronological order.)*

FROM	TO	AC	ARNG/ANG	RC	GRADE	ORGANIZATION	DUTY

2. MILITARY TRAINING

FORMAL MILITARY SCHOOLING COMPLETED

COURSE TITLE AND NUMBER	DURATION OF COURSE		CORRESPONDENCE COURSES	
	WEEKS	DAYS	COURSE/SUBCOURSE TITLE	COURSE HOURS

3. MILITARY QUALIFICATIONS *(List any primary MOS/SSI which has been awarded on orders.)*

MOS/SSI/AFSC	DATE AWARDED	INDICATE HOW QUALIFICATIONS WERE OBTAINED <i>(Service School, On the Job Training, Civilian Experience, etc.)</i>

4. INDICATE ANY ON THE JOB TRAINING WHICH IS QUALIFYING FOR AN MOS/SSI WHICH HAS NOT YET BEEN AWARDED ON ORDERS

DUTY MOS/SSI/AFSC	EXACT TITLE OF POSITION	FROM	TO

SECTION IV - PERSONAL BACKGROUND QUESTIONNAIRE

YES NO

(All Applicants Must Complete) Utilize the Continuation/Remarks section to fully explain any "YES" answers (except 9 & 17). Attach a seperate sheet of paper if more space is necessary.

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Within the last five years, have you been fired for any reason? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Within the last five years, have you quit a job after being notified that you would be fired? |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Have you ever been convicted, forfeited collateral, or now under charges for any felony or firearms or explosives offense against the law? |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. During the past seven years, have you been convicted, imprisoned, on probation or parole, or forfeited collateral or are you now under charges for any offense against the law not included in Question 3? |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. While in the military, have you ever been convicted by a General Court Martial? |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Does the United States Government employ, in a civilian capacity or as a member of the Armed Forces, any relative of yours by blood or marriage? |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Do you receive or are you entitled to receive federal, military retired or retainer pay, service annuities, or other compensation based upon military, federal, civilian service, or eligible for immediate federal civil service? |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Have you ever been removed from military service due to unsuitability? |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. Will you be able to complete a minimum of 5 years of continuous AGR Service prior to completing 18 years of Active Federal Service or your Mandatory Removal Date (MRD)? |
| <input type="checkbox"/> | <input type="checkbox"/> | 10. Are you a candidate for an elected office, holding a civil office (full or part-time) or engaged in partisan political activities as defined in AR 600-20/ANGI 36-101/DoD Directive 1344.10, Political Activities by Members of the Armed Forces on Active Duty? |
| <input type="checkbox"/> | <input type="checkbox"/> | 11. Have you been involuntarily removed from unit (Selected Reserve) service based on maximum years of service, qualitative retention or selective retention board action? |
| <input type="checkbox"/> | <input type="checkbox"/> | 12. Have you been involuntarily removed from unit (Selected Reserve) service for cause or been relieved for cause from any duty assignment, including, but not limited to, relief from command in the past year? |
| <input type="checkbox"/> | <input type="checkbox"/> | 13. Do you currently possess or is a report of suspension of favorable actions pending? |
| <input type="checkbox"/> | <input type="checkbox"/> | 14. Have you voluntarily separated from the AGR Program in any State for one or more days within the past year? (ARNG Applicants Only) |
| <input type="checkbox"/> | <input type="checkbox"/> | 15. Have you been voluntarily separated from the AGR Program or voluntarily separated in lieu of adverse action? |
| <input type="checkbox"/> | <input type="checkbox"/> | 16. (OFFICERS AND WARRANT OFFICERS ONLY.) Have you been non-selected for promotion as not best qualified for promotion board convened by State Headquarters or Department of the Army Headquarters within the past 12 months? |
| <input type="checkbox"/> | <input type="checkbox"/> | 17. Have you met the minimum physical fitness requirements for each component as specified by AR 600-9 (Army) or AFI 36-2905 (Air Force)? |

SECTION V - CONTINUATION/REMARKS

Use the Continuation/Remarks section to fully explain any "YES" answers (except 9 & 17). Attach seperate sheet(s) of paper if more space is necessary.

SECTION VI - CERTIFICATIONS AND AUTHORITY FOR RELEASE INFORMATION

I have completed this application with the knowledge and understanding that any or all items contained herein may be subject to investigation. I consent to the release of information concerning my capacity and fitness by employer, educational institution, law enforcement agencies, and other individuals and agencies to personnel specialists for purpose of employment. I also understand that a false answer to any question in this application may be grounds for not being employed, or for being released after I begin work.

I certify that all of the statements made by me are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

SIGNATURE

DATE



MEMORANDUM FOR President of the Board

SUBJECT: Height and Weight Statement

1. I certify the below listed soldier has been weighed and taped (if required) IAW AR 600-9:

Rank/Name: _____ DOB: _____

Date Weighed/Taped: _____

Actual Weight: _____ Height: _____

Table Weight: _____

Actual Body Fat %: _____

Authorized Body Fat %: _____

Attached is a copy of the DA Form 5501-R/5500-R (if applicable).

2. The POC is the undersigned at

RECRUITING AND TRAINING CADRE SUITABILITY QUESTIONNAIRE

The proponent for this form is ARNG-HRR.

Disclosure: This is required before hiring into a position that supports the accomplishment of the recruiting mission.

Section I: Soldier Information

1a. Soldier's Name (Last, First, Middle):	1b. Rank/Grade:
2. Unit of assignment:	
3. Position Applying for:	

Section II: Type I Offenses (Over the Soldier's Lifetime)

Have you received a civilian or military conviction, or a finding of guilty in a field grade Article 15, Uniform Code of Military Justice (UCMJ) proceedings for any of the offenses listed below:	YES	NO
1. Possessing, distributing, receiving, or viewing child pornography (Article 134 UCMJ).		
2. Forcible sodomy or bestiality (Article 125 UCMJ) (Article 120 or 134 after 1 January 2019).		
3. Any offense punishable under Article 120, 120a, 120b, and 120c UCMJ (Articles 120, 120b, 120c, and 130 after 1 January 2019); similar civilian offense (rape, sexual assault, aggravated sexual contact, abusive sexual contact, stalking, sexual abuse of a child); or any attempt to commit such acts (Article 88 UCMJ).		
4. Prohibited activities with a subject of recruiting efforts, future Soldier, or initial entry trainee that fall under DoD Instruction 1304.33, enclosure 3, paragraph 1a(1)(a-c). (Article 93a after 1 January 2019)		
5. Domestic violence or child abuse (as defined in DoDI 6495.03 or AR 608-18); violent crimes; similar civilian offenses; or attempts to commit such acts (Article 88 UCMJ).		
6. Previous separation from any Service for any Type I offense listed above.		
7. Any conviction that requires an individual to register as a sex offender.		

Note: For Type II and Type III Offenses, "adverse information" is any substantiated adverse finding or conclusion from an officially documented investigation or inquiry, or any other credible information of an adverse nature. To be credible, the information must be resolved and supported by a preponderance of the evidence. To be adverse, the information must be derogatory, unfavorable, or of a nature that reflects clearly unacceptable conduct, integrity, or judgment on the part of the Soldier.

Section III: Type II Offenses (Over a Soldier's Military Career, Including Sister Services)

Note: Information in the Soldier's record suggestive of a Type I offense that does not result in a criminal conviction or a finding of guilty in a field grade Article 15 proceeding will be treated as a Type II offense and reviewed by the approval authority.

Is there adverse information listed against you for any of the offenses listed below:	YES	NO
1. Sexual harassment (Article 92, 93, or 117 UCMJ).		
2. Prostitution or pandering (Article 134 UCMJ).		
3. Sexual activity with a subordinate or fraternization of a sexual nature.		

4. Conduct in violation of the Army's policy regarding participation in extremist organizations or activities or criminal gangs (as defined in AR 600-20, paragraph 4-12).		
5. Any special or general courts-martial conviction or any civilian criminal felony conviction (other than a conviction for Type I offenses).		
6. Any criminal offenses involving a child or children (other than Type I offenses).		
7. Extramarital sexual conduct or inappropriate relationship in violation of AR 600-20, paragraphs 4-14 or 4-15 (other than sexual activity with a subordinate or		
8. Wrongful broadcast or distribution of intimate visual images (Article 117a UCMJ).		
9. Illegal drug use or possession or distribution, including abuse of prescription medication and synthetic drugs (Article 112a UCMJ).		
10. Initial enlistment waivers for derogatory information related to any Type I offense.		
11. Type I offenses for which the Soldier was not convicted in a court of law or received an Article 15 or higher UCMJ action.		
12. Alcohol abuse (as defined in AR 600-85).		
Section IV: Type III Offenses (Within the Last 5 Years Unless Otherwise Stated)		
Is there adverse information listed against you for any of the offenses listed below:	YES	NO
1. Relief for cause noncommissioned officer evaluation report or officer evaluation report while in current grade or in the past 5 years, whichever is longer.		
2. Previous separation from any Service for any Type III offense.		
3. Initial enlistment waivers for derogatory information (not related to an offense listed under Type II).		
4. Assault (other than categories listed under Type I).		
5. Larceny, fraud, or robbery (Articles 121, 122, and 132 UCMJ).		
6. Burglary (Article 129).		
7. Prohibited activities with a subject of recruiting efforts, future Soldier, or initial entry trainee that fall under DoDI 1304.33, enclosure 3, paragraph 1a(1)(d-n).		
Section V: Administrative Reports That Prevent Initial Appointment to These Positions		
1. Are you flagged, barred from reenlistment/extension, or coded with any administrative information indicating legal investigation is underway?		
2. Are you pending determination by a Medical Evaluation Board, Physical Evaluation Board, or Military Occupational Specialty Administrative Retention Review process?		
3. Do you have a current Periodic Health Assessment (PHA)?		
Section VI: Acknowledgement		
By signing below, I acknowledge I have answered the above sections truthfully and honestly.		
Name.	Signature.	Date.

POLICE RECORD CHECK		1. DATE OF REQUEST (YYYYMMDD)		OMB No. 0704-0007 OMB approval expires March 31, 2021	
<p>The public reporting burden for this collection of information is estimated to average 27 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-informationcollections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.</p> <p>PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION. RETURN COMPLETED FORM TO ADDRESS SHOWN AT BOTTOM OF FORM.</p>					
SECTION I - (To be completed by Recruiting Service)					
2. NAME OF APPLICANT (Last, First, Middle Name(s), Alias)		3. SEX		4. PLACE OF BIRTH	
		<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		a. CITY b. COUNTY c. STATE	
5. DATE OF BIRTH (YYYYMMDD)	6.a. ETHNIC CATEGORY		6.b. RACIAL CATEGORY (X one or more)		7. SOCIAL SECURITY NUMBER
	<input type="checkbox"/> (1) HISPANIC OR LATINO <input type="checkbox"/> (2) NOT HISPANIC OR LATINO		<input type="checkbox"/> (1) AMERICAN INDIAN/ALASKA NATIVE <input type="checkbox"/> (2) ASIAN <input type="checkbox"/> (3) BLACK OR AFRICAN AMERICAN <input type="checkbox"/> (4) NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER <input type="checkbox"/> (5) WHITE		
8. ADDRESS IN ADDRESSEE'S JURISDICTION (See "MAIL TO" block)				9. DATES RESIDED AT THIS ADDRESS	
a. NUMBER AND STREET (Include apartment no.)		b. CITY		c. STATE	d. ZIP CODE
				a. FROM (YYYYMMDD)	b. TO (YYYYMMDD)
10. PERSON MAKING THIS REQUEST					
a. NAME (Last, First, Middle Name(s))		b. RANK	c. SIGNATURE		d. TITLE
SECTION II - (To be completed by Applicant)					
PRIVACY ACT STATEMENT					
<p>AUTHORITY: 10 U.S.C. Sections 136, 504, 505, 12102; 14 U.S.C. Sections 351 and 632; DoDI 1304.2; DoDI 1304.26; and E.O. 9397 (SSN), as amended.</p> <p>PRINCIPAL PURPOSE(S): The information collected on this form is used to screen and identify applicants to the Armed Forces who may have discreditable involvement with the police or other law enforcement agencies. Completed forms are used to conduct background records checks used to determine eligibility of applicants for accession into the Armed Forces. Completed forms are covered by recruiting and official military personnel SORNs maintained by each of the Services.</p> <p>ROUTINE USE(S): The routine uses are found in the associated system of records notices listed below: A0601-270, U.S. Military Processing Command Integrated Resources System (USMIRS); http://dpcl.d.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-view/Article/570661/a0601-270-usmepcom-dod/ A0601-210c TRADOC, Army Recruiting Prospect System; http://dpcl.d.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570073/a0601-210c-tradoc/F036AETC-R,AirForceRecruitingInformationSupportSystem(AFRISS)Records;http://dpcl.d.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/569780/f036-aetc-r/ M01133-3, Marine Corps Recruiting Information Support System (MCRISS); http://dpcl.d.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570628/m01133-3/N01133-2,RecruitingEnlistedSelectionSystem;http://dpcl.d.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570318/n01133-2/ DHS/USCG-027, Recruiting Files System of Records; http://www.gpo.gov/fdsys/pkg/FR-2011-08-10/html/2011-20225.htm</p> <p>DISCLOSURE: Voluntary. However, failure of the applicant to complete Section II may result in refusal of enlistment in the Armed Forces of the United States. An applicant's SSN is used to conduct the police records check and keep all records together during the enlistment process.</p>					
11. I HEREBY CONSENT TO RELEASE FROM YOUR FILES THE INFORMATION REQUESTED BELOW.				SIGNATURE	
SECTION III - (To be completed by Police or Juvenile Agency)					
<p>The person described above, who claims to have resided at the address shown above, has applied for enlistment in the Armed Forces of the United States. Please furnish from your files the information relative to Section III below. A return envelope is provided for your convenience.</p>					
12. DOES THE APPLICANT HAVE A POLICE OR JUVENILE RECORD, TO INCLUDE MINOR TRAFFIC VIOLATIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO (If YES, what was the offense or charge, date, disposition and sentence?)					
13. IS APPLICANT NOW UNDERGOING COURT ACTION OF ANY KIND? (If YES, give details.) <input type="checkbox"/> YES <input type="checkbox"/> NO					
THIS IS TO CERTIFY THAT THE ABOVE DATA, AS CORRECTED, ARE TRUE AND CORRECT ACCORDING TO THE RECORD ON FILE IN THIS OFFICE. THIS INFORMATION IS CONFIDENTIAL AND CANNOT BE USED IN ANY OTHER MANNER EXCEPT FOR OFFICIAL PURPOSES.					
14. DATE (YYYYMMDD)		15. TITLE		16. VERIFIED BY (Signature)	
LAW ENFORCEMENT AGENCY MAIL TO:			RECRUITING AGENCY MAIL FROM:		
<div style="border: 1px solid black; width: 100%; height: 100%;"></div>			<div style="border: 1px solid black; width: 100%; height: 100%;"></div>		