

MOARNG VOLUNTARY TRANSFER FOR DEPLOYMENT FORM

NAME (Last, First, MI):

RANK: UNIT/UIC:

LIST ALL MOS/AOC'S THAT YOU CURRENTLY HAVE:

PHONE: EMAIL:

Are you interested in remaining with the deploying unit upon return. Yes: No:
(this could terminate an Incentive)

Desired unit for deployment:

(Leave blank if you have no preference)

Would you be willing to waive your 120 day notification period for deployment? Yes: No:
(All mobilizing Soldiers are entitled to a minimum 120-day notification period. Answering yes does not take place of the 120-day notification waiver)

Are you willing to reclass? Yes: No:

When would you like this volunteer request to expire (365 days if left blank)

Comments:

I certify that _____ is in good standing with the unit and has no existing/pending flags for adverse action, no height/weight/APFT failures, no positive urinalysis and no known medical readiness issues.

Name: _____ Date: _____
Soldier Requesting Signature

Name: _____ Date: _____
Unit Approval, Company Commander Signature

Name: _____ Date: _____
Battalion Approval, Battalion Commander Signature

Name: _____ Date: _____
Brigade Commander, Brigade Commander Signature

Volunteers will be placed on deployments as needed and notified through the proper command channels. Please do not contact the G1 Mobilization section about your volunteer request, unless it is to remove the request. Completed forms should be emailed to: 1LT Loren Crowder at loren.c.crowder.mil@mail.mil or SGT Precious Breuklander at precious.h.breuklander.mil@mail.mil