

Personnel Action Packet Checklist

A-2-A-3 Request for Reclassification (ASI/SQI)(AGR)

1. SOLDIER'S NAME (Last, First MI) 2. RANK 3. EMAIL ADDRESS 4. DATE INITIATED

6. UNIT NAME 7. UIC 8. UNIT/RPAC POC RANK/TITLE NAME 9. RPAC NAME

10. POC CONTACT INFORMATION 11. OFTS CMD 12. RPSC 13. POC SIGNATURE

a. Phone:

b. Email:

14. REQUIRED PROCESS FLOW

a. Intermediate:

b. Intermediate:

c. Final Approval Auth:

15. Required Forms and Documents

1. Copy of this checklist
2. DA Form 4187 (Personnel Action) (Requesting ASI/SQI)
3. DA Form 1059 and/or certificate of completion

16. CERTIFYING HR STAFF MEMBER

17. STAFF MEMBER SIGNATURE

SOLDIER'S NAME (Last, First MI) RANK

18. REMARKS