DEPARTMENT OF THE ARMY
UNIT/COMMAND NAME HERE
STREET ADDRESS
JOINT BASE LEWIS-MCCHORD, WA 98433-9500

(OFFICE SYMBOL) DATE (DD Month YYYY)

MEMORANDUM FOR COMMANDER, Commander, Joint Base Garrison
ATTN: Installation DARTS Administrator, Joint Base Lewis-McChord, Washington 98433

SUBJECT: Request for Level 1 SRP DARTS Access

1. Under the provisions of I Corps OPORD 414-14, dated 10 July 2014, request the following Personnel be granted Level 1 SRP DARTS Access:

_____	_____	BDE HR Tech, etc.
Rank	Name	Title

2. Soldiers have been properly trained on how to use the access required as annotated on the attached request form.

3. Soldiers understands the implications of falsifying data entry in the DARTS program.

4. Soldiers understands that access will be deleted if the system self-locks after 30 days of non-use.

5. POC for this action is (name and phone number)

NAME
LTC (or higher), Branch
Battalion Commander

EXAMPLE