PERSONNEL ACTION

For use of this form, see PAM 600-8; the proponent agency is DCS, G-1.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Title 10, USC, Section 3013, E.O. 9397 (SSN), as amended

PRINCIPAL PURPOSE: To request or record personnel actions for or by Soldiers in accordance with DA PAM 600-8.

ROUTINE USES: The DoD Blanket Routine Uses that appear at the beginning of the Army's compilation of systems of records may apply to this system.

DISCLOSURE: Voluntary; however failure to provide Social Security Number may result in a delay or error in processing the request for personnel action.

1. THRU *(Include ZIP Code)*	2. TO *(Include ZIP Code)*	3. FROM *(Include ZIP Code)*
	S-1 PERSONNEL ACTIONS YOUR UNIT	YOUR UNIT UNIT PHONE

SECTION I - PERSONAL IDENTIFICATION

4. NAME *(Last, First, MI)*	5. GRADE OR RANK/PMOS/AOC	6. SOCIAL SECURITY NUMBER
JOE, G.I.	RANK / MOS	000-00-0000

SECTION II - DUTY STATUS CHANGE *(AR 600-8-6)*

7. The above Soldier's duty status is changed from _____ to _____ effective _____ hours, _____ _____

SECTION III - REQUEST FOR PERSONNEL ACTION

8. I request the following action: *(Check as appropriate)*

☐	Service School *(Enl only)*	☐	Special Forces Training/Assignment	☐	Identification Card
☐	ROTC or Reserve Component Duty	☐	On-the-Job Training *(Enl only)*	☐	Identification Tags
☐	Volunteering For Oversea Service	☐	Retesting in Army Personnel Tests	☐	Separate Rations
☐	Ranger Training	☐	Reassignment Married Army Couples	☐	Leave - Excess/Advance/Outside CONUS
☐	Reassignment Extreme Family Problems	☐	Reclassification	☐	Change of Name/SSN/DOB
☐	Exchange Reassignment *(Enl only)*	☐	Officer Candidate School	☒	Other *(Specify)* FLPB
☐	Airborne Training	☐	Asgmt of Pers with Exceptional Family Members		

9. SIGNATURE OF SOLDIER *(When required)*	10. DATE *(YYYYMMDD)*

SAMPLE

SECTION IV - REMARKS *(Applies to Sections II, III, and V) (Continue on separate sheet)*

NOTE: SM MUST SIGN AND DATE BLOCKS 9 AND 10

PLEASE ADD THE FOLLOWING REMARKS:

From: Department of the Army HRC, and Commander PERSCOM, Fort Knox KY
Subject: Procedures for Foreign Language Proficiency Bonus - FLPB
Authority: IAW AR 11-6 201601, DA PAM 11-8 2001601, and the G-2 Memoradum dated 1 June 2015, Subject - Department of the Army Strategic Language List.

ADDITIONAL INSTRUCTIONS (FOR BN S-1)
1. Prepare application (DA Form 4187) for unit commander's approval.
2. Verify eligibility from recent DA Form 330.
3. Obtain Battalion Commander's approval.
4. Prepare RFO on DA Form 2446 (Request for Orders).

APT office at Stone Education Center: 253-967-3889
For more information: https://www.hrc.army.mil/tagd/foreign%20language%20proficiency%20bonus%20flpb

SECTION V - CERTIFICATION/APPROVAL/DISAPPROVAL

11. I certify that the duty status change *(Section II)* or that the request for personnel action *(Section III)* contained herein -

☐ HAS BEEN VERIFIED ☐ RECOMMEND APPROVAL ☐ RECOMMEND DISAPPROVAL ☐ IS APPROVED ☐ IS DISAPPROVED

12. COMMANDER/AUTHORIZED REPRESENTATIVE	13. SIGNATURE	14. DATE *(YYYYMMDD)*