

REQUEST FOR ANG AGR PERSONNEL ACTION

NAME: _____ **SSAN:** _____ **GRADE:** _____
UNIT: _____ **DOB:** _____ **Security Clearance:** _____

NATURE OF REQUEST: Promotion Reassignment **VA Number:** _____
 Vacancy Announcement

Effective Date:	Current Assignment	Proposed Assignment
PAS code:		
FAC:		
MPCN:		
UMD Title:		
PD Number:		
PD Title:		
Auth. Rank/Grade:		
DAFSC:		

PAFSC: **2AFSC:** **3AFSC:** **TAFMSD:**

Vacancy Announcement Statewide (min: 21 days) Nationwide (min: 30 days) Wing AGR Only (min: 21 days)
Selecting Official: _____ **Vice:** _____

Requesting Official/Supervisor: _____

Approval:	_____	_____	_____
	Typed Name	Signature	Date
Unit Commander:	_____	_____	_____
	Typed Name	Signature	Date
Comptroller:	_____	_____	_____
	Typed Name	Signature	Date
HRO:	_____	_____	_____
	Typed Name	Signature	Date

Remarks