APPLICATION FOR ACTIVE GUARD/RESERVE (AGR) POSITION

The proponent agency is NGB-ARH. The prescribing directive is NGR (AR) 600-5 / ANGI 36-101

PRIVACY ACT STATEMENT

1. AUTHORITY: Title 32 USC 502(f), AR 135-18, NGR (AR) 600-5, ANGI 36-101.
2. PRINCIPAL PURPOSE: To provide information for use in determining eligibility/qualifications for Active Guard/Reserve (AGR) positions. A copy will be provided to the Applicant. The original will be maintained by the Human resources Office for state records. For organizational use only.
3. ROUTINE USES: None.
4. DISCLOSURE: Voluntary; However, if not provided you will not be accepted into the AGR program.

POSITION ANNOUNCEMENT #:	POSITION TITLE:

NAME: *(Last, First, Middle)*	DATE OF BIRTH: *(yyyymmdd))*
CURRENT HOME ADDRESS: *(Street, City, State, Zip Code)*	HOME PHONE: OFFICE PHONE:

(Enlisted) DATE OF ENLISTMENT:	GRADE:	MOS/SSI/AFSC:	ETS DATE:
(Officer/WO) DATE OF FEDERAL RECOGNITION:	GRADE:	BRANCH:	ROPMA/MRD DATE:

SECURITY CLEARANCE:

SECTION I - EDUCATION AND SPECIAL QUALIFICATIONS

1. COLLEGE OR UNIVERSITY: *(Officer Applicants - Accredited Colleges only)*

Name, City & State	*Date From*	*Date To*	*Degree Program*	*Credit Hours*
Chief Undergraduate Subject:				
Chief Graduate Subject:				

2. OTHER SCHOOLS OR TRAINING: *(Vocational, Trade or Business)*

Name, City & State	*Date From*	*Date To*	*Course Title*	*Hours Completed*

3. SKILLS AND QUALIFICATIONS: Special skills and qualifications with office machines (Word Processing - WPM), wheel and track vehicles, etc.
Also list any licenses or certificates held (Pilot, Nurse).

SECTION II - EMPLOYMENT HISTORY

May inquiry be made of your present employer regarding your character, qualification, and record of employment?
(A "No" answer will not affect your consideration for employment.)

CHECK ONE: ☐ YES ☐ NO

1. NAME AND ADDRESS OF EMPLOYER:	DATES EMPLOYED		AVERAGE HRS. PER WEEK
	FROM	TO	

TITLE OF POSITION:	IMMEDIATE SUPERVISOR & PHONE NUMBER:	NO. OF EMPLOYEES YOU SUPERVISED:
TYPE OF BUSINESS:	YOUR REASON FOR LEAVING:	

DESCRIPTION OF WORK: *(Describe your specific responsibilities and accomplishments)*

OTHER EMPLOYMENT

2. NAME AND ADDRESS OF EMPLOYER:	DATES EMPLOYED		AVERAGE HRS. PER WEEK
	FROM	TO	

TITLE OF POSITION:	IMMEDIATE SUPERVISOR & PHONE NUMBER:	NO. OF EMPLOYEES YOU SUPERVISED:
TYPE OF BUSINESS:	YOUR REASON FOR LEAVING:	

DESCRIPTION OF WORK: *(Describe your specific responsibilities and accomplishments)*

SECTION III - MILITARY HISTORY

1. MILITARY SERVICE: *(Start with most recent service and show changes in grade and duty in reverse chronological order.)*

FROM	TO	AC	ARNG/ANG	RC	GRADE	ORGANIZATION	DUTY

2. MILITARY TRAINING:

FORMAL MILITARY SCHOOL TRAINING COMPLETED

COURSE TITLE AND NUMBER	DURATION OF COURSE		CORRESPONDENCE COURSES	
	WEEKS	DAYS	COURSE/SUBCOURSE TITLE	COURSE HOURS

3. MILITARY QUALIFICATIONS *(List any primary MOS/SSI which has been awarded on orders.)*

MOS/SSI/AFSC	DATE AWARDED	INDICATE HOW QUALIFICATIONS WERE OBTAINED *(Service School, On-the-Job Training, Civilian Experience, etc.)*

4. INDICATE ANY OJT WHICH IS QUALIFYING FOR A MOS/SSI WHICH HAS NOT YET BEEN AWARDED ON ORDERS.

DUTY MOS/SSI/AFSC	EXACT TITLE OF POSITION	FROM	TO

SECTION IV - PERSONAL BACKGROUND QUESTIONNAIRE

YES	NO	*(All Applicants Must Complete) Attach a separate sheet fully explaining any "YES" answers (except 9 & 10).*
☐	☐	1. Within the last five years, have you been fired for any reason?
☐	☐	2. Within the last five years have you quit a job after being notified that you would be fired?
☐	☐	3. Have you ever been convicted, forfeited collateral, or now under charges for any felony or firearms or explosives offense against the law?
☐	☐	4. During the past seven years, have you been convicted, imprisoned, on probation or parole, or forfeited collateral or are you now under charges for any offense against the law not included in Question 3?
☐	☐	5. While in the military, have you ever been convicted by a General Court Martial?
☐	☐	6. Does the United States Government employ in a civilian capacity or as a member of the Armed Forces any relative of yours by blood or marriage?
☐	☐	7. Do you receive or are you entitled to receive federal, military retired or retainer pay, service annuities, or other compensation based upon military, federal, civilian service, or eligible for immediate federal civil service?
☐	☐	8. Have you ever been removed from military service due to unsuitability?
☐	☐	9. Will you be able to complete a minimum of 5 years of continuous AGR Service prior to completing 18 years of Active Federal Service or your Mandatory Removal Date (MRD)?
☐	☐	10. Are you a candidate for an elected office, holding a civil office (full or part-time) or engaged in partisan political activities as defined in AR 600-20/ANGI 36-101/DoD Directive 1344.10, Political Activities by Members of the Armed Forces on Active Duty?
☐	☐	11. Have you been involuntarily removed from unit (Selected Reserve) service based on maximum years of service, qualitative retention or selective retention board action?
☐	☐	12. Have you been involuntarily removed from unit (Selected Reserve) service for cause or been relieved for cause from any duty assignment, including but not limited to relief from command in the past year?
☐	☐	13. Do you currently possess or is a report of suspension of favorable actions pending?
☐	☐	14. Have you voluntarily separated from the AGR Program in any state for one or more days within the past year? (ARNG Applicants Only)
☐	☐	15. Have you been voluntarily separated from the AGR Program or voluntarily separated in lieu of adverse action?
☐	☐	16. (OFFICERS AND WARRANT OFFICERS ONLY.) Have you been non-selected for promotion as not best qualified for promotion board convened by Headquarters, or Department of the Army Headquarters, within the past 12 months?
☐	☐	17. Has met the minimum requirement for each fitness component in addition to scoring an overall score of 75 point or higher, per AFI 36-2905.

SECTION V - CERTIFICATIONS AND AUTHORITY FOR RELEASE INFORMATION

I have completed this application with the knowledge and understanding that any or all items contained herein may be subject to investigation. I consent to the release of information concerning my capacity and fitness by employer, educational institution, law enforcement agencies, and other individuals and agencies to Personnel Specialists for purpose of employment. I also understand that a false answer to any question in this application may be grounds for not being employed, or for being released after I begin work.

I certify that all of the statements made by me are true, complete, and correct to the best of my knowledge and belief and are made in good faith.	SIGNATURE:	DATE: