APPLICATION FOR ACTNE DUTY FOR TRAINING, ACTNE DUTY FOR SPECIAL WORK, TEMPORARY TOUR OF ACTIVE DUTY, ANNUAL TRAINING, AND FULL-TIME NATIONAL GUARD DUTY FOR SPECIAL WORK FOR SOLDIERS OF THE ARMY NATIONAL GUARD For use of this form, see NGR 37-111 (draft) ; the proponent agency is NGB-ARM

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY:	IO USC 12301(d) / 32 USC 502(f)			
PRINCIPLE PURPOSE:	To determine eligibility and schedule individuals for active duty for special work, Temporary Tours of Active Duty, full-time National Guard duty for special work, active duty for training or additional annual training on requested dates.			
ROUTINE USES:	To identify the applicant as a Reserve Component member and to issue active duty for active duty for training orders.			
DISCLOSURE:	Completing this form is mandatory for individuals applying for active duty for special work or active duty for training. If not completed, you will not be eligible for the requested tour.			
PART   - APPLICANT (Read instructions in NGR 37-111 (draft) before completing this form.)				

1. TO (Include ZIP code)

2. NAME (Last, First, MI)		3. SSN						
4a. PERMANENT HOME ADDRESS	(Include ZIP code)	5a. ADDRESS FROM WHICH YOU WILL REPORT FOR DUTY (if different from permanent home address) (include ZIP code)						
4b. HOME TELEPHONE NUMBER (II	<b>nclude</b> area code)	5b. HOME TELEPHONE NUMBER (Include area code)						
4c. BUSINESS TELEPHONE NUMBE	R (Include area code)	5c. BUSINESS TELEPHONE NUMBER (Include area code)						
6. UNIT OF ASSIGNMENT OR ATTA	CHMENT	7. GRADE	8. BRANCH/MOS					
9. SEXMF	IO. D.O.B.	11. MARITAL STATUS	12. NO. OF DEPENDANTS					
13. PRIMARY SSI (AOC)/MOS	14. DUTY SSI (AOC)/MOS	15. HEIGHT	16. WEIGHT					
17. 🔄 I am 🗌 I am not	drawing a pension, disability compensation. or retired pay from the U.S. Government	18. TOTAL YEARS, MONTHS, DAYS OF ACTIVE FEDERAL SERVICE (AFS)						
19. NAME, RANK AND SIGNATURE OF NGB/STATE/TERRITORY HUMAN RESOURCE OFFICER (or AGR TOUR MANAGER) VERIFYING DATA IN BLOCK 18.								
20. DATES OF ADSW/FTNGDSW/TTAD/ADT/AT REQUESTED								
a. FIRST CHOIC	E	b. SECOND CHOICE						
NUMBER OF DAYS BEGIN	NING DATE/TIME	NUMBER OF DAYS	BEGINNING DATE/TIME					
LOCATION		LOCATION						
DUTY/TRAINING AGENCY		DUTY/TRAINING AGENCY						
21. To the best of my knowledge and belief, I am physically qualified for active military duty. I was								
a. LAST EXAMINED ON		b. AT						
22. SIGNATURE		23. DATE						

24. REMARKS										
"I understand that, although at the completion of my tour, I may be within 2 years of qualifying for an active duty retirement under 10 USC 1293, 3911, or 3914, it is current Army policy that I will be released from FTNGD at the completion of my tour unless I am offered a follow-on tour as approved by CNGB. I hereby waive sanctuary and consent to being ordered to FTNGD for a period indicated on my order and consent to my release from FTNGD at the completion of this tour."										
ADDITIONAL REMAR			(Signature of a	pplicant)						
(THIS ACTION WILL I	NOT BE APPROVED WITH		ER'S SIGNATURE IN		К)					
25. PAY ENTRY BAS	IC DATE 26. SEC	CURITY CLEARAN	NCE 27. P	ROMOTION		RANK				
29. RYE <b>DATE</b>	4				NDATORY REMOVAL DATE 32. UIC ficers)					
33. HIV TEST DATE 34. PANOGRAPHIC DENTAL X-RAY ON FILE YES NO										
35. List of all previous AD, TTAD, AT, ADT, IADT, ADSW, FTNGD, FTNGDSW, FTNGD-CD in the previous and current fiscal year showing inclusive dates, purpose of tours, and HQ or agency to which attached.										
a. PER	IOD OF PRECEDING DU	NO. DAYS	b. TYPE TRAINI DUTY (AD, AI , FTNGDSW e	DSW,	c. LOCATION/ INSTALLATION	d. DUTY PERFORMED				
	•									
NAME AND SIGNATU	ire of unit commande	DATE GRAI	<b>l</b> DE, TITLE							
NAME AND SIGNATU	IRE OF RECORDS CUST		DATE GRAI	DE TITLE						
NAME, SIGNATURE AND TELEPHONE NUMBER OF NGB/STATE/TERRITORY ADSW/FTNGDSW APPROVING AUTHORITY VERIFYING ALL INFORMATION.					(Approving official initial appropriate box) THIS TOUR APPLICATION IS APPROVED THIS TOUR APPLICATION IS NOT					
DATE GRADE					APPROVED					
NAME AND OFFICE OF POC					COMMERCIAL AND DSN TELEPHONE					

DETERMINING THE APPROVAL AUTHORITY FOR ACTIVE DUTY (AD) OR FULL-TIME NATIONAL GUARD DUTY (FTNGD) SPECIAL WORK LONG AND SHORT TOURS OTHER THAN ACTIVE GUARD RESERVE

For the purpose of these questions the **terms** Active Duty "AD" and Full-Time National Guard Duty "FTNGD" programs refer to **ALL** short and long tour paid duty programs available to soldiers within the ARNG (i.e. AT, ADT, **ADSW, TTAD, FTNGD-CD, FTNGDSW, including AT with unit or service in another components, etc..**) other than **IDT** and **RMAs** (Tour guidance for ADSW (T-10) is within AR **135-200** or FTNGDSW (T-32) is within NGR 37-I 11, office of primary responsibility is NGB-ARO-OY and NGB-ARM respectively).

1. Under what Title (10 USC or 32 USC ) and program of AD/FTNGD is this tour? \_

2. Will the soldier achieve or do they currently have 17 years of AFS prior to/during this tour? (No /Yes - Requires CNGB approval)

3. Will this soldier achieve or does this soldier have 18 years of AFS prior to/during this tout? (No / Yes - CAN NOT APPROVE)

5. How long is the proposed tour?

6. Has the soldiers performed any other AD or FTNGD (to include service in other components) within this FY?. (No / Yes - How Many - Total Days of AD/FTNGD )

7. If this tour, in conjunction with all other **AD/FTNGD** tours, cumulative total **IS LESS** THAN 180 days of service this FY, then **TAG** has approval authority. (Yes **/** No)

8. If this tour, in conjunction with all other **AD/FTNGD** tours, cumulative total **IS** MORE **THAN** 180 days of service this FY, then **CNGB** must approve an exception to policy prior to the state publishing a tour order. Is a waiver necessary? (Yes **/** No).

NOTE: No soldiers are permitted to accumulate six or more years of continuous AFS (all breaks less than 30 days) and become eligible for separation pay. Breaks in AD/FTNGD programs of less than 30 days do not constitute a valid break in service.

9. Does the soldier's tour begin within the first 60 days of the new FY? (Yes / No)

10. If the soldier's tour begins within the **FIRST** 60 days of the new FY, has the soldier performed MORE THAN 30 days of cumulative **AD/FTNGD** within the last quarter of the preceding FY? (Yes / No)

11. Will the soldier be within six months of MRD or ETS at the **BEGINNING** of the tour? (Yes **/** No) If the answer is yes then the **CGNB** is exception to policy approving authority.

12. DA Form 1058-R for:

a. ADSW. Do you possess a copy of the **DA Form 1058-R** which has the signature of the applicant in block 24 for the current tour? (Yes then process / No then return for signature). Tour extensions require a new DA Form 1058-R for that extension period,

b. FTNGDSW - Do you possess a copy of the **ARNG Format 1058-R** which has the signature of the applicant in block 24 for the current **tour? (Yes then process / No then return for signature).** Tour extensions require a new DA Form 1058-R for that extension period.

13. Publishing Orders:

a. For TAG level of **approval** tours, retain a copy of this checklist, a copy of the **DA/ARNG** Format 1058-R and maintain with your file copy of the soldier's tour order.

b. For CNGB level waivers forward this checklist (to arrive at NGB 45 days prior to desired start date), a copy of the DA **Form 1058-R/ARNG Format** 1058-I request for waiver and supporting documents. if approved these documents will be returned and must be maintained with your file copy of the soldier's tour order. **If** the waiver request is not approved these documents will be returned with no further requirement to maintain.