

AMEDD GENERAL EXCEPTION
(For use of this form see USAREC Reg 601-37)

SECTION I - PERSONAL DATA

The following information must be completed prior to submission of exception.

1. APPLICANT'S NAME (Last, first, MI):			2. RSID:			3. TODAY'S DATE:		
4. PROJECTED AOC:		5. CORPS:						
		VC	AN	DC	MC	SP	MS	
6. COMPONENT:								
a. Active duty:						b. Reserve:		
DIR	UTH	DIINT	PSR24	FAP	AGD	DIR	IMA	IRR
OTFW	CPRP	CARP	ECP	PTBAY	GCG	TPU	NAAD	REFRAD
HPLR	FYGME	BONUS	HPSP (How many years?) _____			STRAP	BONUS	HPLR

SECTION II - PROCESSING DATA

7. APPLICATION DEADLINE DATE:			8. BOARD READY DATE:			9. BOARD START DATE:			
10. PHYSICAL PROFILE:		11. MILITARY SERVICE:		12. PS MOS:		13. PS AOC:		14. CURRENT DRILLING MEMBER?	
		NPS	PS					YES	NO
15. QUALITY CONTROL DATE:			16. QUALITY CONTROL BY:						

SECTION III - REASON FOR EXCEPTION

Requires a two-part response: 1) What is the exception? and 2) State the exact reason why you need the exception.

17. EXCEPTION:		
Extension to application deadline date	MTF PE	Telephonic interview
Extension to board-ready date	ECLT requirements	Other _____ (Specify)
Missing documents	Working copy of PE	
18. REASON:		

SECTION IV - DETACHMENT

19. REVIEWED AND/OR FORWARDED BY:		20. FILE(S) ATTACHED:	
		YES	NO
21. RECOMMENDATION:		22. DETACHMENT CONTROL NUMBER:	
Approval	Disapproval		

SECTION V - HEALTH SERVICES DIRECTORATE

23. REVIEWED AND RETURNED BY:			
24. RESULTS:		25. HSD CONTROL NUMBER:	
Approved	Disapproved		
26. CONDITIONS OF APPROVAL OR REASON FOR DISAPPROVAL:			