



DEPARTMENT OF THE ARMY
(YOUR UNIT ADDRESS STREET)
(YOUR UNIT ADDRESS POST/ZIPCODE)

XXXX-XX

DD/MM/YYYY

MEMORANDUM FOR Commander, HQ, USAREC, ATTN: RCRO-HS-AN-(AECP),
Room 2002, 1307 3rd Avenue, FT Knox, KY 40121-2726

Subject: SUBJECT: AMEDD Enlisted Commissioning Program request for Waiver for
SSG Public, John Q, 123-45-6789.

1. In accordance with AR 135-100 and the AMEDD Enlisted Commissioning Program Guidelines, I request a waiver for (type of conviction).
2. Explain the details of the incident; include any fines or incarceration time, as well as probation. The local Staff Judge Advocate office must notarize it.
3. I can be reached at the following address: 1010 Meadow RD, Anywhere, USA 56789; DSN 123-4567, commercial 123-456-7890, or email john.q.public.mil@mail.mil.

NAME
Rank/USA
Title