

AIRMAN TRANSFER REQUEST

The Privacy Act of 1974 applies, this form is for official use only

INDIVIDUAL DATA

Grade, Last Name, First Name, MI

Requested Effective Date

Social Security Number

Mailing Address

LOSING UNIT

GAINING UNIT

Organization & Zip

Organization & Zip

PAS Code

PAS Code

Member is:

Air Technician

AGR

Traditional Guard Member

PAFSC:

DAFSC:

3AFSC:

PCN:

FAC:

OJT Status:

Date Entered Training:

Duty Title:

CAFSC:

2AFSC:

Auth Grade:

Overgrade Code:

Overgrade Code Expiration Date:

Excess Code:

Excess Code Expiration Date:

LOSING UNIT

Approval

Disapprove

Name & Grade of Approving Official:

Signature:

GAINING UNIT

Approval

Disapprove

Name & Grade of Approving Official:

Signature:

162nd CCG HEADQUARTERS (if applicable)

Approval

Disapprove

Name & Grade of Approving Official:

Signature:

HEADQUARTERS, JFHQ-ANG

Approval

Disapprove

Name & Grade of Approving Official:

Signature:

REMARKS