


**TEXAS ARMY NATIONAL GUARD
TITLE 32 ACTIVE GUARD RESERVE (AGR)
VACANCY ANNOUNCEMENT**

AGR Announcement

	Texas Military Department Texas Army National Guard Post Office Box 5218 Austin, TX 78763-5218	Announcement #	AGR 24-041
		Opening Date	09 November 2023
		Closing Date	11 December 2023

Position Title: Training NCO	Location of Position: HHC 71ST MI EXP BDE San Antonio, TX
MOS: 35F30	
Grade/Rank: E6/SSG	Open to: TXARNG SOLDIERS ONLY MOS: 35F Preferred, Any MOS may apply
Minimum Grade to apply: E4 Maximum Grade to apply: E6	

REQUIRED DOCUMENTS TO BE SUBMITTED
INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

1. **Cover Page** - AGR vacancy announcement with Personal Contact Information listed below.
2. **NGB Form 34-1 Traditional Soldiers (M-Day, Tech must fill this out!)** Application for Active Guard/Reserve (AGR). AGR personnel must complete a memorandum of consideration in accordance with AR 25-50. Memorandum will not exceed 1 page in length.
3. **SELECTION BOARD copy of ERB – Certified/Validated** by Readiness NCO or Unit S-1. Line Scores must be included. DA Photo is not authorized.
4. **DD Form 214s** - Copy Member 4 or Service 2 (indicating SPD Code) or NGB Form 22.
5. **Copy of last five NCOERs** - Submit a memorandum to the President of the Board explaining reason(s) for any missing NCOERs/unrated time. A letter of recommendation or performance evaluation will be submitted on Soldiers not yet due an evaluation.
6. **Individual Medical Readiness (IMR) from MEDPROS** -
 -PHA - must be within **1 YEAR** of announcement **OPENING DATE**.
 -HIV Testing - must be within **2 YEARS** of announcement **OPENING DATE**.
 -Dental Class - **1 or 2** - A deployable asset.
 -If applicable, include **PERMANENT PROFILE**. Soldiers must **NOT** be on a **TEMPORARY PROFILE**.
7. **DA Form 705 (ACFT)** - most recent RECORD ACFT within **1 YEAR** of application date.
 -Ensure DA 705 states "**FOR RECORD GO**" and is filled out properly with HT and WT.
 -If applicable must provide a passing copy of the OPAT within **1 YEAR** of **OPENING DATE**.
 -If applicable must include DA Form 5500-R or DA Form 5501-R (Body Fat Content Worksheet).
8. **Certified Height and Weight Memorandum** - From Unit Commander or authorized representative.
 -Height and weight must be **CONDUCTED** within **30 DAYS** of announcement **OPENING DATE**.
9. **Statement of Security Verification** - from Unit Security Manager in memorandum format.
10. **DD Form 369 (Police Record Check)** - applicant must complete Sections I, II, leave #10 & section III blank (must be signed and dated). Must have publishing date of 2019.
11. **Current NGB 23B RPAM**
12. **TXARNG Title 32 AGR - VA Disability Questionnaire** - Applicant must complete, sign and date.

Applicant Contact Information

RANK:	PHONE:
NAME:	EMAIL:

POINT OF CONTACT FOR APPLICATION PROCESS:

AGR STAFFING INBOX
ng.tx.txarng.mbx.agr-staffing@army.mil

POINT OF CONTACT FOR BOARD & POSITION:

SGM Cliff A. Partee and CW2 Tania Garcia at
cliff.a.partee.mil@army.mil and tania.garcia6.mil@army.mil

CONSIDERATION FACTORS:

- All applications will receive consideration for this position without regard to race, religion, color, national origin, sex, age, political affiliation, or other non-merit factors.
- All applicants must be able to attend appearance board.
- A applicants require a background check prior to selection notification

AGR POSITION DESCRIPTION

HUMAN RESOURCES NCO

Responsible for the ensuring successful accomplishment of those tasks which support the unit's training programs and objectives. Drafts training schedule for approval which comply with command guidance, directives, and publications of higher headquarters. Maintains the training library and related training equipment and aids. Maintains all training support materials. Prepares materials for advising the unit commander on unit mobilization posture and requirements. Provides the information required for the unit status report. Attends all unit training assemblies, and annual training periods providing assistance and guidance in the preparation for and execution of unit training. Conducts preparatory visits as required to training sites to ensure availability of and to procure required training areas, range, and training equipment. Maintains the unit MOS qualification training program. Advises and assists the Company Readiness NCO on military education requirements and forwards applications for Army Service schools. Assists in planning, updating, and executing mobilization plans and loading plans, and unit supply planning. Attends schools and conferences as required by training, development, and military education requirements. Conducts Mission Analysis as a member of the company staff. Writes orders in support of contingency operations. Maintains secure/unsecure networks. Deploys on diplomatic missions. Interacts with Global Combatant Command staff and Theater Special Operations Command Staff. Interacts with Special Forces Command Staff, U.S. Army Special Operations Command Staff, and U.S. Special Operations Command Staff. Analyzes and writes operational plans at the strategic, theater, and tactical level. Develops and implements Programs of Instruction.

Performs other duties as assigned.

AGR QUALIFICATIONS

1. **TXARNG Enlisted** membership not to exceed application pay grade. Selected applicants in pay grade that exceeds authorized MTOE assignment on application will take a voluntary reduction in grade prior to assignment.
2. Must be qualified for initial entry into or continued service in the AGR Program IAW AR 135-18, NGR 600-5, AR 40-501, and be capable of performing the duties assigned and implied by grade, MOS and position as prescribed above.
3. Must be able to meet all military education and FTUS requirements in accordance with NGR 600-5, NGR 600-100, NGR 600-101, and current policies/directives.
4. Must attend and successfully complete the appropriate TXARNG and NGB mandated Full Time Unit Support (FTUS) Training Requirements within 12 months of assignment. Failure to do so may result in separation.
5. Must not have any unfavorable actions of any kind. Must not be flagged and must not have any temporary or permanent profile that would prevent successful completion of a retention/period physical.
6. Must be a deployable asset.
7. Must attend all Inactive Duty for Training (IDT) and Annual Training (AT) periods and perform duties in the assigned duty MOS.
8. Must be able to complete a 3-year initial tour of active duty or FTNGD prior to the date of mandatory removal from an active status based on age, or service (without any extensions), under any provisions of law or regulation, as prescribed by current directives.
9. Must be at least 18 years of age and not reached 55th birthday.
10. Must have completed Initial Entry Training (IET).
11. If PULHES numerical indicator of P3 or P4, then the requirements of AR 600-60 must be met prior to accessioning into the AGR program.

CONDITIONS OF EMPLOYMENT

1. **Current on-board Technician applicants - Full time technicians selected for an AGR position are responsible for submitting the Uniformed Services Employment and Reemployment Rights Act paperwork thru their fulltime chain of command to the Human Resource Office. In addition, technicians are responsible for ensuring their time and attendance is accurately documented to reflect the appropriate leave status. Failure to submit documentation may result in a debt to the technician.**
2. **Current on-board AGR applicants are ineligible to apply if within a stabilization period IAW TXARNG 600-5.**
3. **Must possess and be able to maintain a TS Security Clearance with SCI for continuation in the AGR Program. Failure to maintain SECRET Security Clearance will result in separation from Title 32 AGR Program.**
4. Must demonstrate the ability to effectively communicate verbally and in writing.
5. Human Immune Deficiency Virus (HIV) testing for all Soldiers will be accomplished within 24 months prior to initial entry.
6. Must possess a valid state driver's license and be able to become qualified to operate vehicles organic to the unit.
7. Favorable drug screening test within 15 days of initial entry into the AGR Program is mandatory.
8. IAW TXARNG PAM 600-5, Initial Hire AGR Soldiers will be stabilized for 24 Months from date of assignment.
9. Soldiers who have filed for or are receiving Veterans Affairs (VA) disability benefits must pass an Active-Duty Physical conducted at Military Entrance Processing Station (MEPS) IAW AR 40-501 within 30 days of notification of Selection for AGR Positions.

PLEASE NOTE: ACCEPTANCE OF AN AGR POSITION MAY RESULT IN TERMINATION AND/OR REPAYMENT OF MILITARY INCENTIVES. PLEASE CHECK YOUR CONTRACT AND CONTACT YOUR SERVICING EDUCATION/INCENTIVES OFFICE OR THE RECRUITING/RETENTION OFFICE.

OPTIONAL DOCUMENTS THAT MAY BE SUBMITTED

1. Copy of any Certificate of Training that is not listed on ERB.
2. Copy of special skill certification or license that is pertinent to the position.
3. Recommendation letters from current or previous employers, commanders, organizations etc.
4. Federal Employee Performance Appraisals or civilian performance evaluation and/or incentive award certificate.
5. Counter Drug, Drug Interdiction, or Law Enforcement performance appraisal.
6. Formal explanation for any discrepancy listed in your official military records. Must be in memorandum format IAW AR 25-50, For the President of the Selection Board. Cannot be for a referred evaluation.

WHERE TO SUBMIT THE APPLICATION

(All applications must be received prior to 1600hrs (CST) on the closing date of announcement)

Applicants must contact AGR Staffing if they are not contacted within five business days after the announcement closing date to verify their packet has been received.

***3 Methods for submitting an application:**

Preferred: EMAIL to: ng.tx.txarng.mbx.agr-staffing@army.mil

E-mail Subject Line should only contain Announcement # - Rank, Last Name, First Name

(Example: AGR 23-134 – SGT Snuffy, Joe).

Please allow up to 5 business days following closure of announcement to receive EMAIL confirmation. Soldier(s) may contact AGR Staffing Section at any time to verify their application has been received and/or to correct any deficiencies prior to announcement closing date. **(All documents must be scanned as ONE PDF)**

Hand Delivered: Applications may be **hand delivered** by applicant or on behalf of applicant to the AGR Staffing office located on Camp Mabry BLDG 8, AGR Services, by 1600 hours. An email confirmation will be sent once application is received. **(No binders, staples, or tabs).**

Mailed: Address to AGR Services, ATTN: NGTX-AGR, PO Box 5218, Austin, TX 78763-5218. Express Mail: 2200 W 35th ST, Austin, TX 78703-1222. Application must be received and stamped in by 1600 HOURS on closing date. ***Note:** Mailing your application through Overnight delivery a day prior to the closing date is not a guarantee it will be received before applications are sent to the unit for board proceedings* An email confirmation will be sent once application is received. **(No binders, staples, or tabs).** Applicants will not submit an AGR application using Military Postage IAW NGR 600-5 and AR 135-18.

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

APPLICATION FOR ACTIVE GUARD/RESERVE (AGR) POSITION

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

PRIVACY ACT STATEMENT**AUTHORITY:** Title 32 USC 502(f), AR 135-18, NGR (AR) 600-5, ANGI 36-101.**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.**ROUTINE USES:** None.**DISCLOSURE:** Voluntary; however, if not provided you will not be considered for 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:

MRD DATE:

SECURITY CLEARANCE:

SECTION I - EDUCATION AND SPECIAL QUALIFICATIONS1. COLLEGE OR UNIVERSITY: *(Officer Applicants - Accredited Colleges only)*

Name, City & State	Date From	Date To	Degree Program	Credit Hours	Quarter/Semester
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 we contact 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:

NUMBER OF EMPLOYEES YOU SUPERVISED:

TYPE OF BUSINESS:

YOUR REASON FOR LEAVING:

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

SECTION II - EMPLOYMENT HISTORY (Continued)

OTHER EMPLOYMENT

May we contact ~~an~~ employer regarding your character, qualification, and record of employment?
 (A "NO" answer will not affect your consideration for employment.)

CHECK ONE: YES NO

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

TITLE OF POSITION:	IMMEDIATE SUPERVISOR & PHONE NUMBER:	NUMBER OF EMPLOYEES YOU SUPERVISED:
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TYPE OF BUSINESS:	YOUR REASON FOR LEAVING:
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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 SCHOOLING 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 <i>(Service School, On the Job Training, Civilian Experience, etc.)</i>

4. INDICATE ANY ON THE JOB TRAINING WHICH IS QUALIFYING FOR AN 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

		<p><i>(All Applicants Must Complete) Utilize the Continuation/Remarks section to fully explain any "YES" answers (except 9 & 10). Attach a separate sheet of paper if more space is necessary.</i></p>
YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	1. Within the last five years, have you been fired for any reason?
<input type="checkbox"/>	<input type="checkbox"/>	2. Within the last five years, have you quit a job after being notified that you would be fired?
<input type="checkbox"/>	<input type="checkbox"/>	3. Have you ever been convicted, forfeited collateral, or now under charges for any felony or firearms or explosives offense against the law?
<input type="checkbox"/>	<input type="checkbox"/>	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?
<input type="checkbox"/>	<input type="checkbox"/>	5. While in the military, have you ever been convicted by a General Court Martial?
<input type="checkbox"/>	<input type="checkbox"/>	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?
<input type="checkbox"/>	<input type="checkbox"/>	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?
<input type="checkbox"/>	<input type="checkbox"/>	8. Have you ever been removed from military service due to unsuitability?
<input type="checkbox"/>	<input type="checkbox"/>	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)?
<input type="checkbox"/>	<input type="checkbox"/>	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?
<input type="checkbox"/>	<input type="checkbox"/>	11. Have you been involuntarily removed from unit (Selected Reserve) service based on maximum years of service, qualitative retention or selective retention board action?
<input type="checkbox"/>	<input type="checkbox"/>	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?
<input type="checkbox"/>	<input type="checkbox"/>	13. Do you currently possess or is a report of suspension of favorable actions pending?
<input type="checkbox"/>	<input type="checkbox"/>	14. Have you voluntarily separated from the AGR Program in any state for one or more days within the past year? (ARNG Applicants Only)
<input type="checkbox"/>	<input type="checkbox"/>	15. Have you been voluntarily separated from the AGR Program or voluntarily separated in lieu of adverse action?
<input type="checkbox"/>	<input type="checkbox"/>	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?
<input type="checkbox"/>	<input type="checkbox"/>	17. Have you met the minimum requirement for each fitness component by scoring an overall score of 75 points or higher, per AFI 36-2905.

SECTION V - CONTINUATION/REMARKS

Use the Continuation/Remarks section to fully explain any "YES" answers (except 9 & 10). Attach a separate sheet of paper if more space is necessary.

SECTION VI - 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.

<p>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.</p>	<p>SIGNATURE:</p>	<p>DATE:</p>
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POLICE RECORD CHECK		1. DATE OF REQUEST (YYYYMMDD)		OMB No. 0704-0007 OMB approval expires 20250531	
<p>The public reporting burden for this collection of information is estimated to average 27 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-informationcollections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.</p> <p>PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION. RETURN COMPLETED FORM TO ADDRESS SHOWN AT BOTTOM OF FORM.</p>					
SECTION I - (To be completed by Recruiting Service)					
2. NAME OF APPLICANT (Last, First, Middle Name(s), Alias)			3. SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	4. PLACE OF BIRTH A. CITY B. COUNTY C. STATE	
5. DATE OF BIRTH (YYYYMMDD)	6. A. ETHNICITY <input type="checkbox"/> (1) HISPANIC OR LATINO <input type="checkbox"/> (2) NOT HISPANIC OR LATINO	6. B. RACE (Select one or more) <input type="checkbox"/> (1) AMERICAN INDIAN/ALASKA NATIVE <input type="checkbox"/> (2) ASIAN <input type="checkbox"/> (3) BLACK OR AFRICAN AMERICAN <input type="checkbox"/> (4) NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER <input type="checkbox"/> (5) WHITE			7. SOCIAL SECURITY NUMBER
8. ADDRESS IN ADDRESSEE'S JURISDICTION (See "MAIL TO" block)				9. DATES RESIDED AT THIS ADDRESS	
A. NUMBER AND STREET (include apartment no.)		B. CITY	C. STATE	D. ZIP CODE	A. FROM (YYYYMMDD) B. TO (YYYYMMDD)
10. PERSON MAKING THIS REQUEST					
A. NAME (Last, First, Middle Name(s))		B. RANK	C. SIGNATURE		D. TITLE
SECTION II - (To be completed by Applicant)					
PRIVACY ACT STATEMENT					
<p>AUTHORITY: 10 U.S.C. Sections 136, 504, 505, 12102; 14 U.S.C. Sections 351 and 632; DoDI 1304.2; DoDI 1304.26; and E.O. 9397 (SSN), as amended.</p> <p>PRINCIPAL PURPOSE(S): The information collected on this form is used to screen and identify applicants to the Armed Forces who may have discreditable involvement with the police or other law enforcement agencies. Completed forms are used to conduct background records checks used to determine eligibility of applicants for accession into the Armed Forces. Completed forms are covered by recruiting and official military personnel SORNs maintained by each of the Services.</p> <p>ROUTINE USE(S): The routine uses are found in the associated system of records notices listed below: DoDM 1145.02, Military Entrance Processing Station (MEPS); https://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodm/114502m.pdf?ver=2018-07-23-121425-917 A0601-210c TRADOC, Army Recruiting Prospect System; http://dpcl.d.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570073/a0601-210c-tradoc/ F036 AETC R, Air Force Recruiting Information Support System (AFRISS) Records; http://dpcl.d.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/569780/f036-aetc-r/ M01133-3, Marine Corps Recruiting Information Support System (MCRISS); http://dpcl.d.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570628/m01133-3/ N01133-2, Recruiting Enlisted Selection System; http://dpcl.d.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570318/n01133-2/ DHS/USCG-027, Recruiting Files System of Records; http://www.gpo.gov/fdsys/pkg/FR-2011-08-10/html/2011-20225.htm</p> <p>DISCLOSURE: Voluntary. However, failure of the applicant to complete Section II may result in refusal of enlistment in the Armed Forces of the United States. An applicant's SSN is used to conduct the police records check and keep all records together during the enlistment process.</p>					
11. I HEREBY CONSENT TO RELEASE YOUR FILES FROM THE INFORMATION REQUESTED BELOW.			SIGNATURE		
SECTION III - (To be completed by Police or Juvenile Agency)					
<p>The person described above, who claims to have resided at the address shown above, has applied for enlistment in the Armed Forces of the United States. Please furnish from your files the information relative to Section III below. A return envelope is provided for your convenience.</p>					
12. DOES THE APPLICANT HAVE A POLICE OR JUVENILE RECORD, TO INCLUDE MINOR TRAFFIC VIOLATIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO					
<i>(if YES, what was the offense or charge, date, disposition and sentence?)</i>					
13. IS APPLICANT NOW UNDERGOING COURT ACTION OF ANY KIND? <input type="checkbox"/> YES <input type="checkbox"/> NO					
<i>(if YES, give details.)</i>					
THIS IS TO CERTIFY THAT THE ABOVE DATA, AS CORRECTED, ARE TRUE AND CORRECT ACCORDING TO THE RECORD ON FILE IN THIS OFFICE. THIS INFORMATION IS CONFIDENTIAL AND CANNOT BE USED IN ANY OTHER MANNER EXCEPT FOR OFFICIAL PURPOSES.					
14. DATE (YYYYMMDD)		15. TITLE		16. VERIFIED BY (Signature)	
LAW ENFORCEMENT AGENCY MAIL TO:			RECRUITING AGENCY MAIL FROM:		

TEXAS ARMY NATIONAL GUARD TITLE 32 AGR

VA Disability Benefits Questionnaire

1. Are you receiving VA disability benefits? YES NO (CIRCLE ONE)
2. Are you entitled to receive VA disability benefits, but for the receipt of the retired pay? YES NO (CIRCLE ONE)
3. Have you received VA disability benefits in the past? YES NO (CIRCLE ONE)
4. If you are not receiving VA disability, have you filed for the VA disability benefits? YES NO (CIRCLE ONE)
5. If you are drawing VA disability benefits at what percentage? _____ %

If you answered yes to any question above, I understand that I must take an Active Duty physical at Military Entrance Processing Station (MEPS) IAW AR 40-501 within 30 days of notification of selection for an AGR position. I understand that I must take all medical documents and VA Disability documents with me to MEPS on the day of the physical.

Full name (Last, First Middle) Signature Date

As of 19 February 2014