

## COAST GUARD INFORMAL PHYSICAL EVALUATION BOARD (IPEB) FINDINGS AND RECOMMENDED DISPOSITION

1. ADBD:	<b>SECTION I – DATA CONCERNING EVALUEE</b>			
2. Name ( <i>Last, First, Middle</i> )	3. Grade or Rate	4. Employee Identification No.	5. Date	
6. Creditable Active Duty Service Years _____ Months _____ Days _____		7. Age of Evaluatee Years _____ Months _____		8. Status ( <i>check one</i> ) USCG      USCGR

### SECTION II - FINDINGS

FINDINGS	(N) WILLFUL NEGLECT	(M) INTENTIONAL MISCONDUCT	(A) UN- AUTHORIZED ABSENCE	INCURRED WHILE ENTITLED TO RECEIVE BASIC PAY  (YES OR NO)	PROXIMATE RESULT OF PERFORMANCE OF ACTIVE DUTY OR INACTIVE DUTY TRAINING OR INCURRED IN LINE OF DUTY DURING WAR OR NATIONAL EMERGENCY (YES OR NO)	DISABILITY IS COMBAT RELATED* (YES OR NO) (SW, IN, HS, AC)	DISABILITY PERCENTAGE	VASRD DIAGNOSTIC CODE NUMBER
10.	11.	12.	13.	14.	15.	16.		

17. COMBINED PERCENTAGE OF DISABILITY ►

\* Your disability resulted from a combat related injury as defined by 26.U.S.C. 104. For additional information, you should contact the Department of Veterans Affairs.

18.    Yes    No    Mentally incompetent or disclosure to the evaluatee or information relative to his/her physical or mental condition would adversely affect physical or mental health.

19.    Yes    No    Physically and/or mentally unfit. Substantial evidence demonstrates that evaluatee cannot perform regular or customary assigned duties.

### SECTION III – RECOMMENDED DISPOSITION

20. Check Appropriate Box:

Return to Duty	Temporary Retirement	Permanent Retirement
Separation With Severance Pay	Separation without Severance Pay	

### SECTION IV – SIGNATURE OF IPEB BOARD MEMBERS

Typed Name and Grade of Board President	Signature	Date
Typed Name and Grade of Medical Member	Signature	Date
Typed Name and Grade of Reservist or Other Member	Signature	Date

**SECTION V – STATEMENT BY COUNSEL**

An attorney has been appointed to advise the evaluatee regarding acceptance of the informal physical evaluation board findings and recommended disposition.

I HAVE REVIEWED THOSE FINDINGS IN LIGHT OF THE RECORD OF THE EVALUEE’S CASE, TITLE 10, U.S. CODE, CHAPTER 61; THE VETERAN’S ADMINISTRATION SCHEDULE FOR RATING DISABILITIES, APPLICABLE COAST GUARD PERSONNEL REGULATIONS, AND OTHER APPLICABLE MATERIALS.

I CONTACTED THE EVALUEE ON \_\_\_\_\_ AND COUNSELED HIM/HER REGARDING ACCEPTANCE OR  
 \_\_\_\_\_  
 (Date)  
 REJECTION OF THE INFORMAL PHYSICAL EVALUATION BOARD FINDINGS AND RECOMMENDED DISPOSITION.

\_\_\_\_\_  
 (Signature of Legal Counsel)

\_\_\_\_\_  
 (Date)

An attorney has not been appointed to advise the evaluatee regarding acceptance of the informal physical evaluation board findings and recommended disposition.

**SECTION VI – EVALUEE RESPONSE TO IPEB**

NOTICE TO EVALUEE: THE EVALUEE IS REQUIRED TO TAKE ACTION TO ACCEPT OR REJECT THESE FINDINGS WITHIN 30 DAYS OF THE DATE OF THE RECOMMENDED FINDINGS MEMORANDUM. OTHERWISE, ACTION WILL PROCEED ON THE IPEB FINDINGS AND RECOMMENDATIONS IN ACCORDANCE WITH PARAGRAPH 4. C. PHYSICAL DISABILITY EVALUATION SYSTEM, COMDTINST M1850.2 (SERIES)

I accept the tentative IPEB findings and recommended disposition and waive my right to a formal hearing

I reject the tentative IPEB findings and recommended disposition and demand a formal hearing

I accept the tentative IPEB findings and recommended disposition on the condition that my request for retention with command endorsement, IAW Chapter 2.A, Military Separations Manual, COMDTINST M1000.4 (series), is approved

\_\_\_\_\_  
 (Signature of Evaluatee)

\_\_\_\_\_  
 (Date)

\_\_\_\_\_  
 (Signature of Legal Counsel)

\_\_\_\_\_  
 (Date)

**FOR PSD-de USE ONLY:** Member signed facsimile copy of CGHQ-4808, dated \_\_\_\_\_

**SECTION VII – ACTION OF THE JUDGE ADVOCATE GENERAL**

THE PROCEEDINGS ARE IN ACCEPTED FORM AND ARE TECHNICALLY CORRECT	YES	NO
THE FINDINGS ARE SUPPORTED BY THE EVIDENCE OF RECORD	YES	NO
THE RECOMMENDED DISPOSITION IS SUPPORTED BY THE EVIDENCE OF RECORD	YES	NO
ADDITIONAL COMMENTS ARE ATTACHED	YES	NO

SIGNATURE OF JUDGE ADVOCATE GENERAL (OR DESIGNEE)

DATE

**SECTION VIII – ACTION OF THE FINAL APPROVING AUTHORITY (FOR THE COMMANDANT)**

FINAL ACTION: The findings and recommendations of the Physical Disability Evaluation Board are approved.

SIGNATURE AND TITLE OF THE FINAL APPROVING AUTHORITY (FOR THE COMMANDANT)

DATE

**PRIVACY ACT STATEMENT**

**Authority:** 45 CFR 164.520 and DoD 6025.18-R.

**Purpose:** To provide USCG active duty or reserve member with the findings and recommended disposition of the Physical Disability Evaluation System (PDES).

**Routine Uses:** Authorized USCG personnel will use this information for physical disability evaluation determinations. Any external discloses of this data will be in accordance with DHS/USCG-010, Physical Disability Evaluation System Files, 73 Federal Register (FR) 77768, December 19, 2008.

**Disclosure:** Voluntary.