

FTNGDOS/FTNGDMA/FTE CHECKLIST
FULL TIME NATIONAL GUARD DUTY FOR OPERATIONAL SUPPORT (FTNGDOS)
FULL TIME NATIONAL GUARD DUTY MOBILIZATION AUGMENTEE (FTNGDMA)/FTE
32 USC §502(f)(2) IAW NGB POLICY MEMORANDUM #09-014 (FTNGDOS) AND #09-009 (FTNGDMA)

Name: _____ SSN: _____ Type: _____

E-Mail: _____ Duty Location: _____

- Has less than 16 years AS (Must not serve more than 17 years as a result of the duty). *Rule #1 - Sanctuary (as described by NGB)*
- Is not currently serving on other ADOS/FTNGDOS orders that may cause the member to exceed 1,095 cumulative days (3 years) as a result of this duty within the preceding 4 year window. *Rule #2 - AGR end strength cap (as described by NGB Policy)*
NOTE: Requires TAG waiver to exceed 1,095 days (3 years) of cumulative duty within a 1,460 day (4 year) window; days will not be exceeded unless approval is gained by end date of current duty (Use DA Form 1058-1R for waiver requests). Exceeding 1,095 days will require a General Officer letter of acknowledgement (see ARH #09-009).
- Is not currently serving on other FTNGDOS orders that may cause the member to exceed 2,190 days (6 yrs) as a result of this duty that would qualify for separation pay. *Rule #3 - Separation Pay (as described by NGB Policy) Exceeding 2,190 days will grant the member separation pay upon release from FTNGDOS. Funding for separation pay will come from the operational budget of the Program Manager that generated the order which exceeded the rule.*
- Is not within 6 months of MRD/ETS on the report day of the tour, unless waived. *Rule #4 - MRD/ETS (as described by NGB Policy)*
- Must meet the medical Retention standards IAW Chapter 3, AR 40-501. *Rule #5 - Medical Fitness (as described by NGB Policy)*
- Is within commuting distance of the assigned duty station. *Rule #6 - PCS Funding (as defined in the JFTR U3500b)*
- Has been counseled on the non-availability of TDY Travel. *Rule #7 - TDY Funding must live with in commuting distance of duty location*
- If female, NEGATIVE pregnancy test within 15 days of order start date. *Rule #8 - Pregnancy (as described by NGB Policy - Must show proof of a NEGATIVE pregnancy test)*
- Human immune-deficiency virus (HIV) showing "green" in MODS (MEDPROS IMR). *Rule #9 - HIV (as described by NGB Policy)*

APPLICATION FORMS (The 12 documents are required for each packet, minus #4, where applicable)

- FTNGDOS/FTNGD/MA/OS Checklist ¹ signed by the Applicant, Supervisor, Battalion, Program Manager and/or Hiring Official
- DA Form 1058-R² (Jul 93)
- NGB Form 1058-1R³ (July 02 or August 04, if available)
- GO Letter of Acknowledgement ⁴ if over 1,095 rule
- Retirement Points Accounting Statement (RPAS) within the last 30 days⁵
- Current MEDPROS IMR⁶ with current PHA date and Annual Medical Certificate⁷ (DA Form 7349-R) within 30 days of start**
- DA Form 705⁹ within 12-months of start with height and weight listed (Used to validate flagging action IAW NGB Policy)**
- Applicant Personal Qualification Record (PQR)⁸ showing current home of record (WebUPS Printout)
- ATTRS Screen¹⁰ (for military schooling in excess of 15 days) and AFCOS Orders Query¹¹ (for determining separation pay)
- DA Form 873 or JPAS Certificate¹² (Security Clearance verification if required for duty position being considered)

** If either MEDPROS IMR OR DA Form 705 indicate the applicant is overweight, a DA Form 5500/5501R must be included with the package or the applicant will be disqualified from further consideration.

"I understand that the position to which I am applying is temporary in nature and that it is against policy for anyone to offer or promise full-time employment as a result of this temporary tour. Furthermore, I understand that funding is not available for PCS or TDY travel, that I must reside within commuting distance of my assigned duty station, that I must exhaust or sell (no more than 60 days in career; any over will be lost) any accrued leave if there is at least a one-day break during the tour, and that temporary employment can be terminated or may not be renewed due to funding."

Applicant Signature: _____ Date: _____

AUTHORITY FOR FTNGDOS/FTNGDMA/FTE DUTY

Supervisor Signature: _____ Date: _____ Battalion Signature: _____ Date: _____

Hiring Agency/Program Manager: _____ POC: _____ Phone: _____