

RECOMMENDATION FOR AWARD

For use of this form, see RING PAM 600-8-22; the proponent agency is RING G-1

PRIVACY ACT STATEMENT

APPLICABILITY: All personnel (active, former and retired) of the Rhode Island Army & Air National Guard, service members of the Armed Forces and the Rhode Island Militia (the Independent Chartered Companies, Civil War period units, and the Naval Militia).

PURPOSE(S): To consider individual nominations for awards and/or decorations; record final action; maintain individual award case files.

ROUTINE USES: In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act of 1974, as amended, these records contained therein may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 552a(b)(3) as follows: Information may be disclosed to public and private organizations including news media, which grant or publicize awards or honors.

DISCLOSURE: Disclosure of personally identifiable information is voluntary. However, failure to provide identifying information may delay processing of this application.

1. TO	2. FROM	3. DATE (YYYYMMDD)
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PART I - SOLDIER DATA

4. NAME (Last, First, Middle Initial)	5. RANK	6. DODID/SSN	
7. ORGANIZATION	8. PREVIOUS AWARDS		
9. BRANCH OF SERVICE	10. RECOMMENDED AWARD	11. PERIOD OF AWARD	
		a. FROM	b. TO
12. REASON FOR AWARD			
12a. INDICATE REASON	12b. INTERIM AWARD <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, STATE AWARD GIVEN	12c. POSTHUMOUS <input type="checkbox"/> YES <input type="checkbox"/> NO	13. PROPOSED PRESENTATION DATE (YYYYMMDD)

PART II - RECOMMENDER DATA

14. NAME (Last, First, Middle Initial)	15. ADDRESS		
16. TITLE/POSITION	17. RANK		
18. RELATIONSHIP TO AWARDEE	19. SIGNATURE		

PART III - JUSTIFICATION AND CITATION DATA (Use specific bullet examples of meritorious acts or service)

20. ACHIEVEMENTS
ACHIEVEMENT #1
ACHIEVEMENT #2
ACHIEVEMENT #3
ACHIEVEMENT #4
21. PROPOSED CITATION

NAME (Last, First, Middle Initial)		DODID/SSN	
PART IV - RECOMMENDATIONS/APPROVAL/DISAPPROVAL			
22. I certify that this individual is eligible for an award in accordance with AR 600-8-22; and that the information contained in Part I is correct.		22a. SIGNATURE	22b. DATE (YYYYMMDD)
23. INTERMEDIATE AUTHORITY	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			
24. INTERMEDIATE AUTHORITY	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			
25. INTERMEDIATE AUTHORITY	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			
26. APPROVAL AUTHORITY	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED <input type="checkbox"/> RECOMMEND UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			
PART V - ORDERS DATA			
27a. ORDERS ISSUING HQ		27b. PERMANENT ORDER NO.	31. DISTRIBUTION
28a. NAME OF ORDERS APPROVAL AUTHORITY		28b. RANK	
28c. TITLE/POSITION		29. APPROVED AWARD	
28d. SIGNATURE		30. DATE (YYYYMMDD)	

NAME (Last, First, Middle Initial)		DODID/SSN	
ADDENDUM - INTERMEDIATE AUTHORITY			
25-A1. INTERMEDIATE AUTHORITY	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			
25-A2. INTERMEDIATE AUTHORITY	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			
25-A3. INTERMEDIATE AUTHORITY	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			
25-A4. INTERMEDIATE AUTHORITY	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			
25-A5. INTERMEDIATE AUTHORITY	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			