

OHANG ELIGIBILITY CHECKLIST FOR ENLISTED PROMOTIONS

Privacy Act Statement

Authority: 10 U.S.C 8013, Secretary of the Air Force; 10 U.S.C 8583, Requirement of Exemplary Conduct; 32 U.S.C 307, Federal Recognition of Officers: Examination and Certificate of Eligibility; AFPD 36-29, Military Standards; ANGI 36-2502, Promotion of Airmen.

Principle Purpose: The form will provide vital information in determining the fitness for enlisted promotion in the Ohio National Guard.

Routine Uses: None

Disclosure: Voluntary. However, failure to provide the requested information may result in disqualification for promotion in the Ohio Air National Guard.

Initial Yes/No boxes, provide explanation in comments section for any "Yes" response.	Yes	No
1. Are you under investigation by military or civilian authorities?		
2. In your current enlistment, have you been convicted (excluding minor traffic violations) by a civilian court or undergoing punishment, suspended punishment/sentence, probation, work release program, or any combination of these or similar court-ordered conditions, to include driving under the influence (DUI)/driving while intoxicated (DWI)/operating a vehicle impaired (OVI)?		
3. In your current enlistment, have you been charged, arrested, cited, or convicted for violation of any federal, state, or municipal law, to include minor traffic violations?		
4. In your current enlistment, have you been charged, arrested, cited, or convicted for violation of any military laws, including non-judicial punishment pursuant to Article 15 of the UCMJ?		

Comments:

_____ (Member's Initials) I certify that all information contained above is true and current as of the date of my below signature. Any changes from the current answers will be brought to the attention of my service's Force Support Squadron. I understand that giving false or misleading information may result in adverse action, including but not limited to, discharge from the Air National Guard and as a Reserve in the Air Force.

_____ _____ _____
 Date Name (Last, First, M.I.) Signature

I certify the above individual signed this certificate of his/her own free will.

_____ _____ _____
 Date Name (Last, First, M.I.) Signature