DD MMM YY

From: First M. Last, USN,

To: Commander, Navy Personnel Command (PERS-435)

Subj: REQUEST FOR FY-25 AVIATION department head Retention bonus (ADHRB)

Ref: (a) FY-25 ADHRB Program Information (available on NPC website)

 (b) 37 U.S.C. §334

 (c) DoD Financial Management Regulation, Volume 7A, Chapter 2

 (d) SECNAVINST 7220.88 Series

 (e) OPNAVINST 7220.18 Series

 (f) MILPERSMAN 1920 Series

1. I have read and understand the provisions of references (a) through (f) including all provisions related to termination of payments to be made under this agreement and circumstances under which recoupment of sums paid may be required, to which I agree. I understand that if I fail to fulfill the terms of this contract, I may be subject to repayment of monies received in accordance with references (a), (b) and (c). I hereby apply for the special pay authorized by references (b), (d), and (e).

2. Contingent upon acceptance of my application for this special pay, I agree not to resign, retire or voluntarily terminate my flight status with an effective date within years from the completion of my undergraduate-flight-training-related active duty service obligation (ADSO) or acceptance of this request, whichever is later. I understand that I may not be eligible for transfer or redesignation if I don’t meet the criteria outlined in reference (a). I understand that even if my ADHRB service obligation expires prior to the end of my department head (DH) tour, that I may not be released from active duty, or from my assignment in my 1310 or 1320 designator, until my PRD, in accordance with reference (f). I understand that I will be ineligible for any other Aviation Bonus (AvB) program until the expiration of my ADHRB service obligation. I understand that upon approval by PERS-43, this contract is binding, and that thereupon, as a in the community, I will be eligible to receive the  commitment in the total amount of paid out over the length of this agreement as described in reference (a). If I am slated to a command in location of Japan, Lemoore, or Guam, I will be eligible for a total location kicker of after check-in to my Department Head tour. Paid out over the length of this agreement.

3. By submitting this application, I acknowledge my intent and desire to participate in the DH screening process and consent to having my record reviewed, when I become eligible, by an aviation DH screen board (ADHSB). I acknowledge that I will not attempt to influence the board against selecting me (via “don’t pick me” letter, etc), and that, if selected, I will accept orders to and complete a DH tour. I understand that final failure to be selected for DH will terminate this contract. I will retain AvB monies already received through the release date of results of the applicable board, but scheduled future ADHRB installments will be cancelled. I understand that if I attempt to influence the ADHSB against selecting me, if I do not accept orders to or complete a DH tour for any reason, or if I am unable to fulfill my ADHRB service obligation for any reason, I will become ineligible for AvB, scheduled future payments will be cancelled, and previous payments received may be subject to repayment in accordance with references (a), (b), (c), (d), (e).

4. My number is XXX-XXX-XXXX. My preferred e-mail address(es) for ADHRB related business is (enter personal and work email address).

 First M. Last (and signature above)