**DD MMM YYYY**

From: Chaplain (Rank) **First M.I. Last**, USNR

To: CHC Officer Community Manager, (BUPERS-316D)

Subj: Eligibility Consideration for Chaplain Corps Active Duty Indefinite Recall

Ref: (a) MILPERSMAN 1321-105

 (b) CHC Indefinite Recall Opportunity PDF

Encl: (1) NAVPERS 1331/5 Application for Recall to Extended Active Duty

1. Per references (a) and (b), enclosure (1) and the following information is provided to request indefinite recall to active duty.

 a. Date of Birth: **[*DD MMM YYYY*]**

 b. I **[have / have not]** been selected for promotion? (If you have, provide the upcoming promotion month and year **[MMYYYY]**)

 c. Pay Entry Base Date: **[*DD MMM YYYY*]**

 d. Current Reserve Status: **[Selected Reserve or IRR]**

2. While on Active Duty, I **[did / did not]** fail to select (FOS) for promotion. (If you did, provide the number of times and what rank you were when you FOS’d. i.e. ‘1 time as an LT’)

3. While on Reserve Duty, I **[did / did not]** fail to select (FOS) for promotion. (If you did, provide the number of times and what rank you were when you FOS’d. i.e. ‘1 time as an LT’)

4. I **[do / do not]** meet the Navy’s physical readiness standards.

***[APPLICANT’S SIGNATURE]***

**First M.I. Last**

**[DD MMM YYYY]**

**By signing you are attesting to the accuracy of all information provided at this time so an accurate account of your eligibility in meeting indefinite recall criteria can be determined as outlined in MILPERSMAN 1321-105.**