VOLUNTARY RE-ACCESSION ATTESTATION FORM UNITED STATES NAVY

PRIVACY ACT STATEMENT

Authority: Executive Order 14184, applicable DoD and DoN policies.

Purpose: To document the sworn attestation of former Sailors voluntarily seeking re-accession into the United States Navy.

Routine Use: Used by the Navy to determine eligibility for re-accession under the voluntary return to service policy.

Disclosure: Voluntary; however, failure to provide requested information may result in ineligibility for reaccession.

SECTION I – STATEMENT OF ATTESTATION

I, **[Full Name]**, do hereby affirm and attest that my separation from the United States Navy was voluntary and was based solely on my decision to separate or allow my service contract to lapse rather than comply with the COVID-19 vaccine mandate. I understand that my re-accession under this policy is conditional upon my ability to meet all current retention standards.

I further acknowledge that:

- 1. My return to service does not entitle me to backpay, bonuses, or other compensation beyond standard pay and allowances upon reinstatement.
- 2. My reinstatement will be at my last rank and pay grade held at the time of separation.
- 3. My re-accession requires a minimum two-year service commitment.
- 4. I must complete all required administrative and medical screening procedures before my application for re-accession is approved.

I certify that all statements made on this document are true, complete, and correct to the best of my knowledge and belief. I understand that false statements may be grounds for disqualification from re-

accession, or for separation if discovered after accession.

Signature: ______ Date: ______

SECTION II – CERTIFICATION BY RECRUITER/RE-ACCESSION OFFICIAL I certify that the above-named individual has completed this attestation voluntarily and has been informed of all conditions associated with re-accession under this policy. Recruiter_Name: Rank: Unit/Command: Date: Signature: