

APPENDIX C
SAMPLE LETTER
ALCOHOL TREATMENT COMPLETION LETTER

5350
Ser
Date

From: Commanding Officer, _____

To: _____
(Rank/Rate, First MI Last Name, USN/USNR)

Subj: ALCOHOL TREATMENT COMPLETION STATEMENT

Encl: (1) Aftercare Treatment Plan

1. You have completed treatment for alcohol abuse/dependency.
2. You are directed to participate in the prescribed aftercare plan provided in enclosure (1). Your commitment to this plan is vital to your long-term recovery.

(Commanding Officer)

Copy to:
Command DAPA
Command Security Manager
Field Service Record (w/o encl)