ARMY RESERVE ACTIVE GUARD RESERVE (AGR)
SELECTION ELIGIBILITY CHECKLIST

THIS FORM IS REPRODUCIBLE

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY 10 USC 12301(d), 10 USC 10211, and 10 USC 10302.

PRINCIPLE PURPOSE: To determine eligibility and schedule individual for USAR AGR duty.

ROUTINE USES: To identify the applicant and issue orders. SSN is used to identify the applicant.

DISCLOSURE: Completing this form is mandatory for individuals applying for USAR AGR duty. Failure to comply will result in nonselection for Army Reserve AGR duty.

Please mark the appropriate response to each question. <u>If you mark the INELIGIBLE block on any of the questions, DO NOT apply unless you are authorized to request a waiver under Table 2-2, AR 135-18.</u> Waivable requests have been identified with a "W." A request for waiver must be attached to your application, if applicable.

	ELIGIBLE	INELIGIBLE	WAIVER
1. Are you currently a member of the U.S. Army Reserve (Ready Reserve)? If you are a member of the Army National Guard or Active Army, are you willing to accept discharge with a concurrent appointment or enlistment in the USAR? (AR 135-18, Table 2-1, Rule A)	YES ☐	NO ☐	NA ☐
2. Are you able to complete a 3-year initial tour of active duty prior to completing 18 years of active service or the mandatory removal from active status based on age or service (without any extensions) under provision of law or regulation, as prescribed by current directives. (AR 135-18, Table 2-1, Rule E)	YES ☐	NO ☐	W ☐
Authorized Retention Control Point (RCP) as of Feb 14:			
a. If current grade is E4, are you able to complete your initial 3-year tour prior to reaching your RCP of 8 years of active service. (i.e., as an E4, must have less than 5 years of active service).	YES ☐	NO ☐	NA ☐
b. If current grade is E5, are you able to complete your initial 3-year tour prior to reaching your RCP of 14 years of active service. (i.e., as an E5, must have less than 11 years of active service).	YES ☐	NO ☐	NA ☐
3. Do you meet the retention medical standards of AR 40-501 (physical exam)? (AR 135-18, Table 2-1, Rule C)	YES ☐	NO ☐	NA ☐
4. Are you entitled to and/or in receipt of military retired pay? (AR 135-18, Table 2-2, Rule C) Note: This rule is applicable to Soldiers that have 20 or more years of credible service towards a Reserve Retirement.	NO ☐	YES ☐	W ☐
5. Are you a former USAR AGR participant that was voluntarily released within the last year (from date of application)? (AR 135-18, Table 2-2, Rule D)	NO ☐	YES ☐	W ☐
6. Were you involuntarily removed from active duty or full time National Guard, including AGR status, for any of the following reasons? (AR 135-18, Table 2-3, Rule E) a. For cause, to include unsuitability or unfitness (other than for temporary medical disability) for military service, b. As a result of resignation in lieu of adverse personnel action, c. As a result of qualitative management program action, or d. Failure of selection by a tour continuation board. (Table 2-3, Rule E)	NO ☐	YES ☐	NA ☐
7. Have you been relieved for cause from any duty position, including but not limited to relief from command, in the 36-month period preceding your date of application for the AGR Program, or the scheduled date of entry in the AGR Program? (AR 135-18,Table 2-2, Rule G)	NO ☐	YES ☐	W ☐
8. Have you been involuntarily removed from a unit (Selected Reserve) assignment for any of the following reasons? (AR 135-18, Table 2-3, Rule F) a. For cause; b. On attaining maximum years of service, c. As a result of qualitative retention board action, or d. As a result of selective retention board action.	NO ☐	YES ☐	NA ☐

	ELIGIBLE	INELIGIBLE	WAIVER
9. Are you at least 18 years of age and have not reached your 55th birthday? (enlisted only) (AR 135-18, Table 2-1, Rule B)	YES ☐	NO ☐	NA ☐
10. Reenlistment Eligibility: (enlisted only) (AR 135-18, Table 2-1, Rule G)			
a. Are you eligible for reenlistment or extension per Chapter 2, AR 140-111?	YES ☐	NO ☐	W ☐
b. Has a Bar to Reenlistment been initiated or in effect? (AR 135-18, Table 2-3, Rule H)	NO ☐	YES ☐	NA ☐
11. Do you meet the military education requirements for your grade?			
a. As specified in AR 135-18 (Table 2-1, Rule D1a, D2, D3, or D4.)	YES ☐	NO ☐	W ☐
b. As specified in AR 135-18 (Table 2-1, Rule D1b, 1c, or 1d.)	YES ☐	NO ☐	W ☐
12. Are you an officer or warrant officer who has received a referred evaluation report under AR 623-105 in the 36-month period preceding your date of application for the AGR Program or the scheduled date of entry in the AGR Program? (AR 135-18, Table 2-2, Rule H)	NO ☐	YES ☐	W ☐
13. Nonselect for promotion (officer/warrant officer)			
a. Were you nonselected on the latest promotion selection board considering the officer active duty list or warrant officer active duty list? (AR 135-18, Table 2-1, Rule J)	NO ☐	YES ☐	W ☐
b. Were you a nonselectee on the latest consideration by a mandatory Reserve of the Army promotion selection board? (AR 135-18, Table 2-3, Rule M)	NO ☐	YES ☐	NA ☐
14. Were you promoted by a unit vacancy selection board process less than 1 year prior to the convening date of the board? (officer only) (AR 140-30, paragraph 3-2c)	NO ☐	YES ☐	NA ☐
15. Are you under a current suspension of favorable personnel actions (flagged) per AR 600-8-2? (AR 135-18, Table 2-3, Rule G)	NO ☐	YES ☐	NA ☐
16. Are you a COL, LTC, CW5, CSM, SGM, PFC, PV2, or PV1? (OCAR Policy)	NO ☐	YES ☐	NA ☐

GENERAL QUESTIONS: Answer the following questions that are applicable.

1. Are you a high school graduate or GED recipient? (enlisted only) YES ☐ NO ☐

2. Are you receiving disability pay? (If yes, you must terminate disability pay prior to entry.) YES ☐ NO ☐

3. Were you ever in the AGR Program? YES ☐ NO ☐ If yes, when did you leave the program? _____ (Date) (YYYY-MM-DD)

4. Are you married to a service member on active duty? If yes, complete the information in 4a. YES ☐ NO ☐

4a. The following is information about my active duty spouse. I understand there is no guarantee of joint domicile.

NAME: _____ RANK: _____

SSN: _____ BRANCH OF SERVICE: _____

"I certify that the above information is true and accurate to the best of my knowledge."

Date	NAME *(Last, First, Middle)*	SIGNATURE