**COMBAT INFANTRY BADGE CHECKLIST (CIB) – AR 600-8-22, Para 8-6**

**Rank / Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Full SSN/DODID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of the act: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**POC (rank, name, email, phone, state): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**REQUIRED DOCUMENTS (Table H-1, Step 5):**

* DA Form 4187, with endorsements
  + General Officer endorsement on the addendum page of the 4187
* Two or more eyewitness statements (sworn statement) from Soldiers who participated in same ground combat action (must be a firsthand eyewitness, other than the requestor see **Table H-1, note 2**)
* Deployment orders
* One-page narrative description of the qualifying incident
* DD Form 214 (for veteran’s see **Table H-1, note 1**)
* Soldier Records Brief (SRB) (for veteran’s see **Table H-1, note 1**)
* If the request pertains to a member of a sister Service, orders assigning the member to the Army unit must be included.
* Requests for retroactive award of the CIB will not be entertained except where evidence of injustice is presented. **8-6d(2)(a)**

Other supporting documentation, such as: official unit reports, casualty report, line of duty investigation, Purple Heart orders or valor award (If applicable)

**NOTES:**

* For award of the CIB a Soldier must meet three requirements, (1) Be an infantry Soldier satisfactorily performing infantry duties. (2) Be assigned to an infantry unit during such time as the unit is engaged in active ground combat. (3) Actively participate in such ground combat. Campaign or battle credit alone is not sufficient for award of the CIB. See regulation for additional details. **8-6b(1)-(3)**
* “On or after 18 September 2001 – (1) A Soldier must be an Army infantry or SF officer (CMF or AOC 11 or 18) in the grade of COL/O–6 or below, or an Army enlisted Soldier or warrant officer with an infantry or SF MOS, who has satisfactorily performed duty while assigned or attached as a member of an infantry, ranger, or SF unit of brigade, regimental, or smaller size… [and] must be personally present and under fire while serving in an assigned infantry or SF primary duty, while the unit engaged in active ground combat to close with and destroy the enemy with direct fires.” See regulation for additional details **8-6f(1)-(6)**

**COMBAT ACTION BADGE CHECKLIST (CAB) – AR 600-8-22, Para 8-8**

**Rank / Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Full SSN/DODID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of the act: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**POC (rank, name, email, phone, state): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**REQUIRED DOCUMENTS (Table H-1, Step 5):**

* DA Form 4187, with endorsements
  + General Officer endorsement on the addendum page of the 4187
* Two or more eyewitness statements (sworn statement) from Soldiers who participated in same ground combat action (must be a firsthand eyewitness, other than the requestor see **Table H-1, note 2**)
* Deployment orders
* One-page narrative description of the qualifying incident
* DD Form 214 (for veteran’s see **Table H-1, note 1**)
* Soldier Records Brief (SRB) (for veteran’s see **Table H-1, note 1**)
* If the request pertains to a member of a sister Service, orders assigning the member to the Army unit must be included.

Other supporting documentation, such as: official unit reports, casualty report, line of duty investigation, Purple Heart orders or valor award (If applicable)

**NOTES:**

* CAB is **not** MOS-specific, but Soldier must not be assigned or attached to a unit that would qualify the Soldier for the CIB and/or CMB.**8-8b, 8-8d(3)**
* A Soldier must be personally present and under hostile fire while performing satisfactorily in accordance with the prescribed rules of engagement in an area where hostile fire pay, or imminent danger pay is authorized. A Soldier must also be executing an offensive or defensive act while participating in combat operations, engaging, or being engaged by the enemy. **8-8d(2)**
* Requests for retroactive award of the CAB will not be entertained except where evidence of injustice is presented. **8-8g(2)(a)** If applicable, submit supporting documentation.
* Retirees and veterans should address their applications to HRC for processing. The DA Form 4187 with endorsement by the first general officer is not required. All other criteria must be met. **8-8g(2)(c)**

**COMBAT MEDICAL BADGE CHECKLIST (CMB) – AR 600-8-22, Para 8-7**

**Rank / Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Full SSN/DODID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of the act: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**POC (rank, name, email, phone, state): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**REQUIRED DOCUMENTS (Table H-1, Step 5):**

* DA Form 4187, with endorsements
  + General Officer endorsement on the addendum page of the 4187
* Two or more eyewitness statements (sworn statement) from Soldiers who participated in same ground combat action (must be a firsthand eyewitness, other than the requestor see **Table H-1, note 2**)
* Deployment orders
* One-page narrative description of the qualifying incident
* DD Form 214 (for veteran’s see **Table H-1, note 1**)
* Soldier Records Brief (SRB) (for veteran’s see **Table H-1, note 1**)
* If the request pertains to a member of a sister Service, orders assigning the member to the Army unit must be included.
* Other supporting documentation, such as: official unit reports, casualty report, line of duty investigation, Purple Heart orders or valor award

**NOTES:**

* The CMB may be awarded to members of the AMEDD (COL/O–6 and below), the Naval Medical Department (Captains and below), the USAF Medical Service (COL/O–6 and below), assigned or attached by appropriate orders to an infantry unit of either a brigade, regiment, or smaller size, or to a medical unit of company or smaller size, organic to an infantry unit of brigade or smaller size, during any period the infantry unit is engaged in actual ground combat on or after 6 December 1941. Battle participation credit alone is not sufficient; the infantry unit must have been in contact with the enemy. **8-7b(1)**
* Effective 3 June 2005, Soldiers possessing a MOS of 18D are no longer eligible for award of the CMB. **8-7c(4)(b)**
* The sole criterion that qualifies medical personnel for award of the CMB is to be assigned or attached to an infantry, combat arms, or combat aviation unit engaged in active ground combat. (2) Medical personnel, other than those medics organic to infantry units, may qualify only if they serve as medical personnel accompanying infantry, combat arms, or combat aviation units during combat operations. **8-7i(1)-(2)**
* Requests for retroactive award of the CMB will not be entertained except where evidence of injustice is presented. 8-7j(2)(a)

**PURPLE HEART CHECKLIST – AR 600-8-22, Para 2-7**

**https://www.hrc.army.mil/content/Purple%20Heart**

**Rank / Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Full SSN/DODID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of the act: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**POC (rank, name, email, phone, state): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**-------------------------------------------------------------------------------------------------------------------------------REQUIRED DOCUMENTS (AR 600-8-22 Appendix C paragraph C-3e1-10):**

* DA Form 4187 (for currently serving members)
* Chain of command endorsement (through the first general officer in the Soldier’s current chain of command for currently serving members)
* Deployment orders
* Record brief (SRB) or other substantiating personnel qualification records for veterans
* One-page narrative describing the qualifying incident and the conditions under which the member was injured or wounded
* Statements from at least two individuals, other than the proposed recipient who were personally present, observed the incident, and have direct knowledge of the event. Alternatively, other official documentation may be used to corroborate the narrative.
* Casualty report (if applicable)
* SF 600 (Medical Record - Chronological Record of Medical Care), SF 502 (Medical Record – Narrative Summary (Clinical resume)), or equivalent military medical documentation
* DD Form 214 (Certificate of Release or Discharge from Active Duty) (if applicable)
* Morning, unit, or situation reports

**NOTES:**

* For veterans or retirees, General Officer endorsement is not required
* Award may be made for a wound treated by a medical professional other than a medical officer, provided a medical officer includes a statement in the member’s medical record that the severity of the wound was such that it would have required treatment by a medical officer if one had been available to provide treatment. **2-7c(2)**
* The records of medical treatment must have been made a matter of official Army records as described in paragraph 2 – 7. **2-7i(3)(c)**
* Reconsideration Authority: The first general officer (BG/O-7) in the chain of command of the Soldier requesting award of the PH for injuries received during a previous deployment may disapprove the recommendation. **2-7k(4)**