

Georgia Recovery Unit (GRU) Initial Entry Checklist

SOLDIER INFO

RANK & NAME: _____

PHONE NUMBER: _____

CIV EMAIL ADDRESS: _____

ASSIGNED UNIT/UIC: _____

CHIEF COMPLAINT:

A. ADMINISTRATIVE DOCUMENTS/REQUIREMENTS

1. ____ Completed DA Form 4187 (must be signed by Soldier)
2. Most current DA 705
3. Not on Neg End Strength and is an active member of unit
4. Soldier has at least 12 months remaining on current contract

B. MEDICAL DOCUMENTS

1. ____ All supporting medical documentation within 120 days (related to MRC 3 condition(s))
2. ____ Line of Duty Investigation (LOD) initiated at unit level prior to release from unit, # _____ (if applicable) N/A:
4. ____ Physical Profile(s) (DA Form 3349) (Verify it is completed/Approved/in eProfile)
5. ____ Total # of Days in MRC # status _____
6. ____ Previous MEB/PEB decisions from COMPO 1, 2, or 3 (if applicable) N/A:

C. Unit Point of Contact (POC) completing this packet:

1. Rank / Name: _____ Phone: _____
2. Email: _____ Job Title: _____
3. Signature