

NGB FORM 22-5-R, INTERSTATE TRANSFER WORKSHEET

Receiving State: _____ Losing State: _____

Coordinated: _____ Uncoordinated: _____ IST Request Date: _____ Date Submitted: _____

SOLDIER DATA

Last Name: _____ First Name: _____ Middle Initial: _____ MOS: _____ Gender: _____

DOD ID: _____ SSN: _____ IPPS-A Employee #: _____ Rank/Grade: _____ ETS: _____

Current Address: _____ Projected Address: _____

Phone Number: _____ Civilian Email Address: _____

Employment Status: Employed Unemployed Employment Information: _____

Packet Forms:

DA 4856 (IST COUNSELING) DA 5500 / DA 5501
DA FORM 4187 CIF Turn-in / MEMO
PQR or PIR ERB / SRB
IMR Last 3 NCOERS (required for NCOs)
DA 705 / ITR

Soldier Status (check all that apply):

MDAY Title 10 ADOS
AGR Title 32 Title 5
SAD Orders Tech Deployed
W.O.C. ROTC OCS

INDIVIDUAL INFORMATION

Last Physical: _____ Open L.O.D: _____ Flagged: _____ AWOLS: _____ SMOS: _____ ASI: _____ PEBD: _____

Current ACFT: _____ ACFT Date: _____ Meets HT/WT Standards: _____ HT/WT: _____ / _____ BF%: _____

Driver's License: _____ Security Clearance: _____ Incentive Type(s): _____

Line Scores: GT GM EL CL MM CO FA OF SC ST AFQT: _____ DLAB: _____

P U L H E S Level of NCOES: _____ Level of DLC Completed: _____

SM Opt into Blended Retirement: Yes No Opt-in window end date: _____

Additional Information / Reason for IST

CURRENT UNIT INFORMATION

Unit Name: _____ Unit P.O.C: _____ Unit Phone: _____

Address: _____ UIC: _____ PRN: _____
MANDATORY Out-processing counseling Completed: _____

Last deployment dates were _____ to _____ and has deployed _____ times since _____

TO BE VERIFIED BY LOSING UNITS READINESS NCO (CHECK THOSE THAT APPLY *Not Included in Packet*)

<p><u>RPAS STATEMENT UP TO DATE</u></p> <p><u>SRB UP TO DATE AND VERIFIED</u></p> <p><u>SOLDIER AND DEPENDENT ID CURRENT</u></p> <p><u>DOCUMENTS VERIFYING MOS IN IPERMS</u></p> <p><u>CURRENT DA FORM 4836/DD FORM 4/NGB 22-5</u></p> <p><u>DA FORM 369 / EBC</u></p>	<p><u>SOLDIER FLAGGED/BARRED FROM RE-UP/EXTENSION</u></p> <p><u>SOLDIER HAS VERIFIED IPERMS RECORD</u></p> <p><u>DD FORM 93 / SGLV CURRENT</u></p> <p><u>DA FORM 5435-R</u></p> <p><u>UNDER INVESTIGATION FOR SEXUAL ASSAULT</u></p> <p><u>UNDER INVESTIGATION FOR SEXUAL HARASSMENT</u></p>
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