

## OFFICER BRANCH TRANSFER REQUEST CHECKLIST

**NAME:** \_\_\_\_\_ **GRADE:** \_\_\_\_\_  
**HOME PHONE:** \_\_\_\_\_ **CELL PHONE:** \_\_\_\_\_  
**EMAIL ADDRESS:** \_\_\_\_\_  
**UNIT:** \_\_\_\_\_ **UIC:** \_\_\_\_\_ **IPPSA POSN #:** \_\_\_\_\_  
**PARA/LINE:** \_\_\_\_\_ **UNIT POC/PHONE:** \_\_\_\_\_  
**CURRENT BRANCH:** \_\_\_\_\_ **BRANCH REQUESTED:** \_\_\_\_\_  
**MSC POC/PHONE:** \_\_\_\_\_ **EFFECTIVE DATE:** \_\_\_\_\_

REQUIRED ITEMS:	WORKCENTER	COMMENTS/NOTES	INITIALS
GA NG 0227-R	MSC/BN S1	Request to transfer branch (Signed by MSC CDR or first O-6 in chain of command)	
Individual's Branch Transfer Request	INDIVIDUAL	Officer will provide a detailed memorandum stating reasons for requesting branch transfer.	
DA Form 1059	MSC/BN S1	For verification of qualification for the new branch. (For BOLC qualified Officers only).	
SECURITY CLEARANCE	MSC/BN S1	Verification of Security Clearance memo: Secret – 10 years from date of investigation Top Secret – 5 years from date of investigation.	
APFT DA FORM 705	MSC/BN S1	Record APFT within 6 month ( <b>AGR</b> ) or 1 year ( <b>MDAY</b> ) Must be a valid DA Form 705 from the MSC	
HT/WT STATEMENT	MSC/BN S1	Current within 6 Months; Include DA Form 5500 for Body Fat %, (if applicable) Add a discrepancy letter if HT/WT differ on OER and PQR.	
MEDPROS IMR	MSC/BN S1	Print out of current MEDPROS Individual Medical Readiness Report (IMR) for Officer.	
UPDATED OFFICER RECORD BRIEF (ORB)	MSC/BN S1	Must be certified by unit admin personnel and validated by the Officer.	
LAST THREE OERS	MSC/BN S1	OERS: The last three OERs completed on the Officer requesting a branch transfer to Infantry. <b>Verify that they are in iPERMS/OMPF.</b>	
MILITARY BIOGRAPHICAL SUMMARY	INDIVIDUAL	<b>**Only for Officers who are required to have an approved predetermination proponent memorandum</b>	

**Send packet in a single scanned .pdf file via IPPSA Administrative Corrections PAR**