

WARRANT OFFICER MOS CHANGE REQUEST CHECKLIST

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

REQUIRED ITEMS:	WORKCENTER	COMMENTS/NOTES	INITIALS
GA NG 0227-R	MSC/BN S1	Request to change MOS (Signed by MSC CDR or first O-6 in chain of command)	
Individual's MOS Change Request	INDIVIDUAL	Officer will provide a detailed memorandum stating reasons for requesting MOS change.	
MOS Requirements	MSC/BN S1	DA PAM 611-21 excerpt, pre-determination memo, or other documents to validate requirements for MOS	
DA Form 1059/ Other validating documents	INDIVIDUAL	Attach individual's records in accordance with NGR 600-101, paragraph 2-8 or 6-3 to validate WO has met requirements for award of MOS	
Security Clearance	MSC/BN S1	Security Clearance Memo WO MOS Change SOP attachment #3	

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