## **Validation Memorandum**

OFFICE SYMBOL DATE

MEMORANDUM FOR THE CHIEF, NATIONAL GUARD BUREAU, 111 SOUTH GEORGE MASON DRIVE, ARLINGTON, VA 22204-1382

SUBJECT: Validation Memorandum, Senior Leadership RANK Last, First Name, last 4 SSN

- 1. Request **RANK Last Name** be evaluated for **RCMC-M/RCMC-T** state managed orders for a maximum of 179 days.
- 2. **RANK Last name** currently has an unresolved medical condition that began while entitled to military pay and benefits and has been evaluated through our state case management team. Through a case review of his medical condition, **RANK Last name** has been found to be in need of further evaluation and or treatment.
- 3. I acknowledge a medical plan and prognosis summary has been included in the Soldier's medical packet. I recommend approval of the treatment plan based on medical evaluation and documentation. The supporting medical documentation is located in:

HRR – index	
LOD Module (Case #)	
eProfile	
AHLTA (if accessible)	
eCase	
Other	

4. MEDICAL and PROGNOSIS

As attached in Soldier's Medical Packet (document locations referenced above).

Encl Counseling Statement DA Form 4187 FIRST I. LAST RANK, BR Commanding