

Human Resources Strength
Management (NGGA-PEZ)

Enlisted Interstate Transfer

Joint Force Headquarters
Georgia Army National
Guard Marietta, GA
1 October 2023

UNCLASSIFIED

SUMMARY of CHANGE

GAARNG G-1

Revision dtd 1 October 2023

- o Updates Outgoing Enlisted Interstate Transfer Checklist (Figure 2-1a)
- o Removed - APFT to ACFT. ACFT is the Physical Test of Record
- o Removed - IST Soldiers must have COVID vaccination record.
- o Updates IST Soldiers must have a current PHA as required per AR 40-501
- o Updates Medical Review by GA DSS prior to IST acceptance

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Chapter 1

General

1-1. Purpose: To provide clear procedural guidance for Georgia Army National Guard (GAARNG) enlisted Interstate Transfer (IST) procedures.

1-2. References. Required and related publications and prescribed and referenced forms are listed in Appendix A.

1-3. Attachments. Referenced attachments and sample forms are listed in Appendix B.

1-4. Retention Management Software (RMS) Interstate Transfer Module. All ARNG Soldiers transferring between states will be managed within the RMS/IST module. Users may request access to RMS and obtain user guides and training at the following website:
<https://smms.army.pentagon.mil/Security/login.aspx>.

1-5. Officer Interstate Transfer. The procedures and checklists for Officer and Warrant Officer IST are listed in GAARNG G-1 Officer Personnel Management SOP.

Chapter 2

Outbound IST Procedures

2-1. Applicability and Eligibility Criteria

- a. Applicability. Enlisted Soldiers who wish to transfer to the ARNG of another state.
- b. Eligibility Criteria. Soldiers who fall in the below categories are not eligible to transfer to another state.
 - (1) Currently in the medical board process.
 - (2) Has a nontransferable flag.
 - (3) Enrolled in or pending enrollment in Army Substance Abuse Program per AR 600-85.
 - (4) Do not meet the standards of AR 600-9 (The Army Body Composition Program).
 - (5) Do not have a current ACFT.
 - (6) Within four months of current ETS at time of request for transfer.
 - (7) With nine or more unexcused absences within the preceding 12 months.
 - (8) Criteria (4) thru (7) above may be waived by the gaining state.

2-2. Actions Required of Soldier

- a. Soldiers will provide a memorandum to their assigned unit to request to transfer to another state.
- b. Maintain contact with their unit during the IST process until enlisted in the ARNG of the gaining state.
- c. Contact the gaining state point of contact provided by the GAARNG IST Coordinator.

2-3. Actions Required of the Unit

- a. Ensure the Soldier is eligible to transfer.
- b. Complete the GAARNG Enlisted Outgoing IST checklist (figure 2-1a). All documents must be included with the checklist to complete the packet. See Enlisted Outgoing IST Worksheet (figure 2-1b) for additional information.
- c. Complete the DA Form 4187 (figure 2-2).
- d. Complete the DA Form 4856 with the Soldier (figure 2-3). Ensure the Soldier understands the potential impact the IST can have on incentives and education benefits.
- e. After all documents on the checklist have been obtained and completed, initiate an IST case in RMS. Complete tabs one and two only. Input all documents into RMS and provide copies of all documents to the Soldier.
- f. Ensure the Soldier understands that he/she is not released from the GAARNG until the IST has been approved by the GAARNG G1 and the gaining state.
- g. Maintain contact with the Soldier during the IST process until the Soldier has enlisted in the ARNG of the gaining state.

2-4. Actions Required of the GAARNG IST Coordinator

- a. Ensure all required documents are complete and accurate in the Soldiers IST packet.
- b. Forward the complete IST packet to the gaining state IST Coordinator.
- c. When the NGB Form 22-5 is returned from the gaining state, generate transfer orders through IPPSA and retrieve the Soldier's Personnel Qualification Record (PQR).
- d. Forward NGB Form 22-5, transfer orders to HR Systems for IST departure.
- e. After Soldier has been departed, forward NGB Form 22-5 and transfer orders to the gaining state IST Coordinator for rehire.

ENLISTED OUTGOING IST CHECKLIST

NAME: _____ GRADE: _____
 HOME PHONE: _____ CELL PHONE: _____
 EMAIL ADDRESS: _____
 UNIT: _____ UIC: _____
 UNIT POC PHONE: _____ EFFECTIVE DATE: _____

REQUIRED ITEMS:	WORKCENTER	COMMENTS/NOTES	INITIALS
Soldier's Request	INDIVIDUAL	See SOP for sample memo	
NGB 22-5-R IST Worksheet	UNIT	Completed in RMS under Tab 2	
DA Form 4187	UNIT	Must be signed by Unit Commander or delegate	
DA Form 4856	UNIT	Must be initialed and signed by Soldier	
PQR or PIR	UNIT	Personnel Qualification Record / Promotion Individual Record	
DA Form 705	UNIT	Most recent DA 705 showing current, passing score	
DA Form 5500/5501	UNIT	As applicable	
DD Form 214	UNIT	Include all DD 214s for AGRs to AGR ISTs	
MEDPROS/IMR printout	UNIT	Unit will verify current PHA and review printout for any overdue medical issues.	
Unit Clearance Memo	UNIT	See SOP for sample memo	
Last three NCOERs	UNIT	NCOs only	
Soldier Record Brief	UNIT	NCOs only	
COVID Vaccine Record	UNIT	Soldier must have a COVID vaccine Record	

Load ALL documents in RMS/IST module
 DO NOT initiate case in RMS/IST module until you have all documents

Figure 2-1a. Enlisted Outgoing IST Checklist



Enlisted Outgoing IST Worksheet & Frequently Asked Questions

- Please **DO NOT** tell Soldiers they have to find their own unit in a new state before you start their IST packet. Their IST packet should be completed first and then the gaining state's IST coordinator will find a unit for them.
- You **DO NOT** need Battalion or Brigade approval on the DA Form 4187 for an IST packet. Soldier must have Unit Commander approval.
- Soldiers **MUST** have at least FOUR (4) months remaining on current contract.
- Soldiers **MUST** clear unit supply.
- Soldiers **MUST** have COVID vaccine record.
- Upload completed enlisted IST packet in RMS or send via email to the GA Enlisted IST coordinator at ng.ga.gaarnng.list.g1-ist@army.mil.
- *For all outbound Officer ISTs please contact the G1 OPM at:
NG GA GAARNG List NGGA G1 OPB <ng.ga.gaarnng.list.ngga-g1-opb@army.mil>*

IST Packet Documents (where to find examples)

- ___ 1. Soldier's Request to IST (see SOP Figure 2-4 for example)
- ___ 2. NGB Form 22-5-R IST Worksheet (see forms on our website for digital form)
- ___ 3. DA Form 4187 (see SOP Figure 2-2 for example, Signature Authority is Unit Commander)
- ___ 4. DA Form 4856 IST Counseling (see SOP Figure 2-3 for example)
- ___ 5. PQR (Personnel Qualification Record-RCAS) or PIR (Promotion Information Report-IPPS-A)
- ___ 6. DA Form 705 within 12 months (Preferably passing; gaining state may waive requirement)
- ___ 7. DA Form 5500/5501 (if applicable)
- ___ 8. DD Form 214 for AGR to AGR ISTs
- ___ 9. MEDPROS/IMR printout within 12 months
- ___ 10. Unit Supply Clearance Memo or CIF Record (see SOP Figure 2-5 for example)
- ___ 11. Last 3 NCOERs (Complete pending NCOERs before transfer)
- ___ 12. Soldier Record Brief (NCOs only)
- ___ 13. COVID Vaccination Record

Load all applicable documents into RMS. If you have any questions, please contact the Georgia G1-IST office at ng.ga.gaarnng.list.g1-ist@army.mil.

Figure 2-1b. Enlisted Outgoing IST Worksheet & FAQs

PERSONNEL ACTION <small>For use of this form, see PAM 600-8; the proponent agency is DCS, G-1.</small>		
DATA REQUIRED BY THE PRIVACY ACT OF 1974		
AUTHORITY:	Title 10, USC, Section 3013, E.O. 9307 (SSN), as amended	
PRINCIPAL PURPOSE:	To request or record personnel actions for or by Soldiers in accordance with DA PAM 600-8.	
ROUTINE USES:	The DoD Blanket Routine Uses that appear at the beginning of the Army's compilation of systems of records may apply to this system.	
DISCLOSURE:	Voluntary; however failure to provide Social Security Number may result in a delay or error in processing the request for personnel action.	
1. THRU (Include ZIP Code)	2. TO (Include ZIP Code) Interstate Transfer Office ATTN: Xavier Solomon 1000 Halsey Avenue Marietta, GA 30060	3. FROM (Include ZIP Code) Your Unit
SECTION I - PERSONAL IDENTIFICATION		
4. NAME (Last, First, MI)	5. GRADE OR RANK/PMOS/AOC	6. SOCIAL SECURITY NUMBER
SECTION II - DUTY STATUS CHANGE (AR 600-8-5)		
7. The above Soldier's duty status is changed from <u>Georgia Army National Guard</u> to <u>New State</u> effective _____ hours, _____		
SECTION III - REQUEST FOR PERSONNEL ACTION		
8. I request the following action: (Check as appropriate)		
<input type="checkbox"/> Service School (Enl only)	<input type="checkbox"/> Special Forces Training/Assignment	<input type="checkbox"/> Identification Card
<input type="checkbox"/> ROTC or Reserve Component Duty	<input type="checkbox"/> On-the-Job Training (Enl only)	<input type="checkbox"/> Identification Tags
<input type="checkbox"/> Volunteering For Overseas Service	<input type="checkbox"/> Retesting In Army Personnel Tests	<input type="checkbox"/> Separate Rations
<input type="checkbox"/> Ranger Training	<input type="checkbox"/> Reassignment Married Army Couples	<input type="checkbox"/> Leave - Excess/Advance/Outside CONUS
<input type="checkbox"/> Reassignment Extreme Family Problems	<input type="checkbox"/> Reclassification	<input type="checkbox"/> Change of Name/SSN/DOB
<input type="checkbox"/> Exchange Reassignment (Enl only)	<input type="checkbox"/> Officer Candidate School	<input checked="" type="checkbox"/> Other (Specify) Interstate Transfer Request
<input type="checkbox"/> Airborne Training	<input type="checkbox"/> Agent of Peace with Exceptional Family Members	
9. SIGNATURE OF SOLDIER (When required)		10. DATE (YYYYMMDD)
SECTION IV - REMARKS (Applies to Sections II, III, and V) (Continue on separate sheet)		
<p>_____ has requested an Interstate Transfer to _____ effective _____. Soldier understands they have 90 days from the effective date on the NGB Form 22-5 to locate and join their assigned Army National Guard Unit. Soldier must inform losing unit of any changes in address or phone number to avoid being declared an "unsatisfactory participant" and to ensure interstate transfer is successfully completed. If the Soldier is declared an "unsatisfactory participant", they are subjected to discharge or reassignment/transfer to the Individual Ready Reserve (IRR).</p> <p>Soldier's new HQR with contact number: _____</p> <p>Interstate Coordinator for the Gaining State is: _____ Phone number _____</p> <p>VERIFY THAT SOLDIER MEETS:</p> <ol style="list-style-type: none"> 1. Soldier meets Medical Retention Standards. (Yes/No) PHA: _____ MRC: _____ PULHES: _____ 2. Soldier meets Standards of AR 600-9, if typed DA 5500 attached. (Yes/No) Age: ____ H: ____ W: ____ lbs 3. Soldier has 4 plus months left on contract. (Yes/No) ETS: _____ 4. Soldier has less than 9 unexcused absences within the preceding 12 months. (Yes/No) 5. Soldier has a current ACFT (within the last ACFT cycle) if not DA 705 attached. (Yes/No) _____ 6. Soldier pending or enrolled in the Army Substance Abuse Program per AR 600-85. (Yes/No) 7. Soldier cleared unit supply. (Yes/No) 8. Completely vaccinated for COVID 19? (Yes/No) 		
SECTION V - CERTIFICATION/APPROVAL/DISAPPROVAL		
11. I certify that the duty status change (Section II) or that the request for personnel action (Section III) contained herein -		
<input type="checkbox"/> HAS BEEN VERIFIED <input type="checkbox"/> RECOMMEND APPROVAL <input type="checkbox"/> RECOMMEND DISAPPROVAL <input type="checkbox"/> IS APPROVED <input type="checkbox"/> IS DISAPPROVED		
12. COMMANDER/AUTHORIZED REPRESENTATIVE	13. SIGNATURE	14. DATE (YYYYMMDD)

DA FORM 4187, MAY 2014

SUPERSEDES DA FORM 4187, JAN 2000
AND REPLACES DA FORM 4187-1-R, APR 1995Page 1 of 2
APO UCvt 0008

Figure 2-2. Sample DA Form 4187

DEVELOPMENTAL COUNSELING FORM <small>For use of this form, see ATP 6-22.1; the proponent agency is TRADOC.</small>		
DATA REQUIRED BY THE PRIVACY ACT OF 1974 AUTHORITY: 5 USC 301, Departmental Regulations; 10 USC 3013, Secretary of the Army. PRINCIPAL PURPOSE: To assist leaders in conducting and recording counseling data pertaining to subordinates. ROUTINE USES: The DoD Blanket Routine Uses set forth at the beginning of the Army's compilation of systems or records notices also apply to this system. DISCLOSURE: Disclosure is voluntary.		
PART I - ADMINISTRATIVE DATA		
Name (Last, First, MI)	Rank/Grade	Date of Counseling
Organization	Name and Title of Counselor	
PART II - BACKGROUND INFORMATION		
Purpose of Counseling: (Leader states the reason for the counseling, e.g. Performance/Professional or Event-Oriented counseling, and includes the leader's facts and observations prior to the counseling.) This is an event counseling concerning your request to conduct an interstate transfer (IST) to _____. -Due to the Soldier's situation-Job, School, etc. you have requested to move to (Address: _____). -You are being counseled on the proper procedures and requirements for transferring. -You are also being counseled on the possible effects transferring may have on your military career, bonus, pay, education, medical care, current or future employment as well as the welfare of your family. -The purpose of this counseling is not to discourage you from transferring but to ensure we identify any areas of concern that may expose you or your family to risks. Identifying these areas will assist in the implementation of safeguards that will minimize those risks and aid in an uncomplicated transition. -Soldier and family care is a priority, while at the same time, maintaining your confidentiality, trust, and mission accomplishment.		
PART III - SUMMARY OF COUNSELING Complete this section during or immediately subsequent to counseling.		
Key Points of Discussion: Detailed Reason for move: -Transfer eligibility (Identify issues such as passing current APFT, Weight Control. (If available, waiver may be required by gaining State G1.)) -Possible outcome of transfer to the (State) ARNG (Delay in pay, loss of bonuses, loss of education benefits, possible administration reduction in rank, MOS change due to positions available) -Duty performance (AWOL, UCMJ, denied promotion or extension, APFT failure, weight control, negative counseling, unexcused absences) -Current and future employment (include spouse in this question, ensure the family is not going to face a hardship which ties to the next bullet) -Financial status (Trouble paying bills, financial changes in the last 6 months, emergency plan of action, etc.) -Domestic concerns (Breakup, divorce, loss of loved one, domestic violence, family concerned since Soldier returned from deployment) -Medical readiness up to date (PHA, PDHRA, Dental, Vision, PULHES, or profiles) -If specialty care is required for the Soldier and or family, does the receiving state have those medical care facilities? Location? Any active medical case management files (Active E-case, open LOD investigation, Temporary profile or positive, PHA, PDHA, or PDHRA referrals) -Alcohol or substance abuse (Incidents, positive urinalysis, participation in substance abuse programs) -IPERMs current (Missing or requested documents) -Current or pending law violations, court dates or civil proceedings. -Education (Enrolled in college, Tuition Assistance) -Is the Soldier non-deployable for any reason? -Interstate Transfer Discharge (See continuation sheet): -Any questions or concerns that have not been discussed? -Note-If there are any questions or concerns, ensure the Soldier and family receives professional assistance? *Upon completion of the counseling, the Soldier will acknowledge and initial the following: "I have fully disclosed any concerns with my education, finances, or any other area that needs to be addressed prior to transferring to my new unit of assignment. I have fully disclosed any and all medical, illness, injury, medication use, or conditions, that I am aware of. I do not have any open or pending law violations, civil proceedings or pending court dates" _____		
OTHER INSTRUCTIONS This form will be destroyed upon: reassignment (other than rehabilitative transfers), separation at ETS, or upon retirement. For separation requirements and notification of loss of benefits/consequences see local directives and AR 635-200.		

DA FORM 4856, JUL 2014
PREVIOUS EDITIONS ARE OBSOLETE.
Page 1 of 2
AFD LC v1.04ES

Figure 2-3. Sample DA Form 4856



DEPARTMENT OF THE ARMY
JOINT FORCE HEADQUARTERS, LAND COMPONENT
1000 HALSEY AVENUE SE, BLDG 447
MARIETTA GA 30060-4277

1 October 2022

SUBJECT: Requesting an Interstate Transfer

SFC Bob Smith
Unit Address
City, State Zip Code

Dear SFC Smith,

I, (Rank) (Full Name) (Last 4), would like to request a transfer to the (State) National Guard effective (Projected IST Date). I will be moving to (New Address). I would like to transfer because (provide details on why you would like to transfer)

If you have any questions, please contact me at (email@email.com) or (888) 888-8888.

Sincerely,

John F. Doe
Rank
Georgia Army National Guard

Figure 2-4. Sample Soldier IST Request



DEPARTMENT OF THE ARMY
JOINT FORCE HEADQUARTERS, LAND COMPONENT
1000 HALSEY AVENUE SE, BLDG 447
MARIETTA GA 30060-4277

NGGA-XXX

8 October 2019

MEMORANDUM FOR RECORD

SUBJECT: Verification of Supply Clearance: **Rank, Last Name, First Name**

1. The above Soldier requested to be transferred to **State** Army National Guard. The Soldier has turned in all assigned equipment and has been cleared of supply.
2. For more information contact the undersigned at **email** and **phone**.

First name, Last name
RANK, GA ARNG
Readiness NCO

Figure 2-5. Sample Supply Clearance Memo

Chapter 3

Inbound IST Procedures

3-1. Applicability and Eligibility Criteria

- a. Applicability. Enlisted Soldiers who wish to transfer from the ARNG of another state to the GAARNG.
- b. Eligibility Criteria. Soldiers who fall in the below categories are not eligible to transfer to GA.
 - (1) Currently in the medical board process
 - (2) Has a nontransferable flag
 - (3) Enrolled in or pending enrollment in Army Substance Abuse Program per AR 600-85.
 - (4) Do not meet the standards of AR 600-9 (The Army Body Composition Program).
 - (5) Do not have a current ACFT.
 - (6) Within four months of current ETS at time of request for transfer.
 - (7) With nine or more unexcused absences within the preceding 12 months.
 - (8) Criteria (4) thru (7) above may be waived based on the needs of the GAARNG.

3-2. Actions Required of Soldier

- a. Contact the GAARNG IST Coordinator as soon as possible.
- b. Maintain contact with losing state IST Coordinator and unit POC until IST is complete.
- c. Contact the Readiness NCO of the gaining unit in GAARNG provided by the GAARNG IST Coordinator.
- d. Inquiring Soldiers without an IST packet will be allowed to courtesy drill for two drills.
- e. Current AGR Soldiers transferring to an AGR position in Georgia must submit their resignation in their departing state prior to transferring to Georgia.

3-3. Actions Required of the GAARNG IST Coordinator

- a. Once notified of incoming IST, verify the incoming Soldier's eligibility to transfer to GAARNG and provide GAARNG Deputy State Surgeon (DSS) with social security number for medical review.
- b. Process the IST case in RMS from tab four through tab nine.
- c. Utilizing the state vacancy report from IPPSA, determine a position for the incoming Soldier based on MOS and location of their home of record (HOR) in GA.
- d. If there are no vacancies based on Soldier's PMOS or SMOS within commuting distance of Soldier's HOR, determine if the Soldier is willing to drive beyond commuting distance or if Soldier is willing to reclassify. If the Soldier chooses to reclassify, determine the Soldier's eligibility based on vacant positions and Soldier's ASVAB line scores.

e. If there are no vacancies for the Soldier within commuting distance, and the Soldier is not willing to reclassify or drive beyond commuting distance, the transfer request may be disapproved. Prepare a memorandum for signature by GAARNG G1 stating the reasons for disapproval IAW NGR 600-200.

f. Notify the Readiness NCO of the gaining unit of the incoming Soldier.

g. Send the signed NGB Form 22-5 to the losing state in order for them to transfer and depart the Soldier.

h. After receiving the transfer order from the losing state, load all documents into IPERMS and forward complete packet to HR Systems to be rehired into the GAARNG.

i. Complete the IST process in RMS.

3-4. Actions Required of the Unit

a. Contact incoming Soldier to establish a date and time for the Soldier to report to the unit to sign the NGB Form 22-5 and swear into the GAARNG.

b. Return the signed NGB Form 22-5 to the GAARNG IST Coordinator immediately after it is signed.

Appendix A

References

Section I Publications

NGR 600-200

Enlisted Personnel Management

AR 600-8-2

Suspension of Favorable Personnel Actions (Flag)

AR 600-9

The Army Body Composition Program

AR 600-85

The Army Substance Abuse Program

SMOM 22-001

FY22 Interstate Transfer (IST) Program Guidance

Section II Forms

DA Form 4187

Personnel Action

DA Form 4856

Developmental Counseling Form

NGB 22-5

Addendum to DD Form 4 Approval and Acceptance by Service Representative for Interstate Transfer in the Army National Guard

NGB Form 22-5-R

Interstate Transfer Worksheet

Appendix B

Figure List

Figure 2-1a

Enlisted Outgoing IST Checklist

Figure 2-1b

Enlisted Outgoing IST Worksheet

Figure 2-2

Sample DA Form 4187

Figure 2-3

Sample DA Form 4856

Figure 2-4

Sample Soldier IST Request Memo

Figure 2-5

Sample Supply Clearance Memo

Glossary**Abbreviations****ACFT**

Army Combat Fitness Test

ARNG

Army National Guard

iPERMS

Interactive Personnel Electronic Records Management System

IPPS-A

Integrated Personnel and Pay System-Army

IST

Interstate Transfer

PQR

Personnel Qualification Record

RMS

Retention Management Software