Attachment 4
Standardized Reenlistment Worksheet

Privacy Act of 1974, Authority 10 USC 8012, Secretary of the Air Force powers and duties; delegation by AFI 36-2608, Military Personnel Records System. Information from this system of record may be disclosed for any use of the Air Force. If you do not give the required information, it will not be possible to process your request.

Grade/Rank	Name (Last, First, Middle)	SSN (Last 4)	CAFSC	Unit/Deployed Unit

Duty Phone/Deployed Duty Phone	Email Address/Deployed Email Address	Home Station (deployed only)

Unit Commander/Civilian Director Name, Email Address and DSN	CSS Name, Email Address, and DSN

Requested Date of Reenlistment	Leave Selection. I elect the following option: (Check one)
	☐ Carry fwd all my leave ☐ Cash settlement for all accrued leave ☐ Cash settlement for __ days

Reenlistment Reason

☐ FTA 4-yr completing 36 consecutive months (60 consecutive for 6-yr) enlistee

☐ Retainability for Post 9/11 GI Bill or Continuation Pay under BRS

☐ Retainability for PCS/PCA, TDY (to include deployment)

☐ Within 15-month period before DOS for indefinite DEROS

☐ Retainability for OCONUS extension or provide 12 mos due to command sponsorship

☐ Within 15-month period before DEROS

☐ Within 90 days of ETS

☐ Promotion to MSgt, SMSgt or CMSgt

☐ Retainability for Service Schools

MPS Use Only

Obligated Service Months	Authorized TOE Option	Airman's TOE Election	Selective Retention Bonus Zone Multiple	Article 137 Briefing Conducted On, or Certification Attached

Reenlistment Counseling

a. I understand I may sell leave on my reenlistment; not to exceed 60 days total in my career.
b. I have been counseled regarding my bonus entitlement and obligated service; as well as termination and recoupment policies.
c. I understand my authorized term of reenlistment will be in whole years and is determined by any amount of obligated service I have remaining from my current reenlistment/extension that I have executed. The obligated service is added to my reenlistment and my reenlistment cannot exceed my high year of tenure and will not exceed 72 months (term of enlistment and obligated service combined)
d. I understand if I intend to reenlist immediately after separation, I hereby authorize my retention in service for a period not to exceed 7 calendar days beyond my date of separation, to complete separation processing, should I, immediately before or after separation date and before reenlistment decline to reenlist.
e. I understand that I must reenlist at my home station, unless deployed and I must not be on leave; in a leave or separation status on the date of my reenlistment. If I am determined to be on leave or in a leave status on my reenlistment date, I will be required to execute a new reenlistment contract when not on leave.

I have read and understand the reenlistment counseling statements above and I understand the timelines, entitlements and limitation. I also understand it is my responsibility to initiate a request for reenlistment and certify the contracts are correct.

Date Signature