

# REENLISTMENT WORKSHEET

(please allow 2 weeks to process before reenlistment date)

<b>RANK/GRADE</b>	<b>NAME (LAST, FIRST, MIDDLE)</b>	<b>AFSC</b>	<b>UNIT</b>
<b>DUTY PHONE</b>	<b>EMAIL/DEPLOYED EMAIL</b>	<b>DOD ID # (required)</b>	
<b>UNIT COMMANDER/CIVILIAN DIRECTOR</b>		<b>CSS NAME, EMAIL, &amp; NUMBER</b>	
<b>REENLISTMENT REASON</b>			

FTA 4-YR COMPLETING 36 CONSECUTIVE MONTHS (60 MONTHS 6 YRS)  
RETAINABILITY FOR POST 911 GI BILL OR CONTINUATION PAY UNDER BRS  
RETAINABILITY FOR PCS/PCA/TDY (TO INCLUDE DEPLOYMENT)  
WITHIN 90 DAYS OFETS  
PROMOTION TO MSGT, SMSGT, CMSGT  
RETAINABILITY FOR SERVICE SCHOOLS  
WITHIN 15-MONTH PERIOD BEFORE DOS FOR INDEFINITE DEROS  
WITHIN 15-MONTH PERIOD BEFORE DEROS  
RETAINABILITY FOR OCONUS EXTENSION OR PROVIDE 12 MONTHS DUE TO COMMAND SPONSORSHIP

<b>REENLISTMENT DATE</b>	<b>TERM OF ENLISTMENT</b>	<b>LEAVE SELECTION. I ELECT THE FOLLOWING OPTION: (CHECK ONE)</b>
		<b>CARRY FWD LEAVE      CASH SETTLEMENT FOR _____ DAYS</b>

- 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 months and the authorized years and months of my reenlistment is determined by any amount of obligated service I have remaining from any current reenlistment/extension(s) that I have executed. I also understand that any authorized Selective Retention Bonus will be calculated only on the whole years I may reenlist for and that my reenlistment cannot exceed my high year of tenure, plus 1 month and will not exceed 72 months (term of enlistment and obligated service combined), unless otherwise authorized by Air Force policy.
  - 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. Additionally, I understand if I am returning from a leave status, I may not reenlist on the day following my leave end date. 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.

\_\_\_\_\_  
NAME

\_\_\_\_\_  
SIGNATURE