

<p>REPORT OF ADDITIONAL INFORMATION</p> <p>(For use of this form, see USMEPCOM Reg 601-23)</p>	<p style="text-align: center;">DATA REQUIRED BY THE PRIVACY ACT OF 1974</p> <p>AUTHORITY: Title 10, United States Code, Sections 504, 505, 508, and 510, and Executive Order 9397. PRINCIPAL PURPOSE: Record additional information about enlistment qualifications. ROUTINE USES: Process the information for consideration of enlistment eligibility.</p> <p style="text-align: center;">FOR OFFICIAL USE ONLY</p>
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1. IDENTIFICATION DATA			
a. Name:	b. SSAN:	c. SPF:	d. Date:

2. a. Disclosure applies to: PEI PAI Service Only Service and Medical

b. Remarks:

3. Medical Response:	d. Date Reviewed:
<p>_____</p> <p>Signature Commander/Med Officer</p>	
<p>a. <input type="checkbox"/> Qualified</p> <p>b. <input type="checkbox"/> Disqualified</p>	<p>P U L H E S - X</p> <p>c. <input type="checkbox"/> Profile Change</p>
Remarks: _____	

4. Service Response:	d. Date First Response:
<p>_____</p> <p>Signature Counselor/Liaison</p>	
<p>a. <input type="checkbox"/> Qualified - Cleared To Process</p> <p>b. <input type="checkbox"/> Disqualified - Stop Processing</p>	<p>e. Service User ID</p> <p>c. <input type="checkbox"/> Suspend Processing until Further Notice</p>
Remarks: _____	

5. MEPS Data Entry: "BOOO" - Cleared Same Day	"BOOON" - Admin Hold	"BOOOP" - Clear Hold
Date: _____	Date: _____	Date: _____
Initials: _____	Initials: _____	Initials: _____