

MSCoE NCO ACADEMY WLC PACKING LIST

RANK: _____ LAST NAME: _____ FIRST NAME: _____ MI: _____

UNIT: _____

	ITEM	REQ	INITIALS	
			SM	SQD LDR
1	Bag, Duffel	1 EA		
2	Rucksack (complete w/ straps)	1 EA		
3	Bag, Barracks	2 EA		
4	Bag, Waterproof	1 EA		
5	Helmet, Advanced Combat	1 EA		
6	Cover, Helmet w/ rank	1 EA		
7	Band, Helmet w/ last name	1 EA		
8	LBV/LCE/MOLLE complete w/ 2 canteens	1 EA		
9	First Aid Kit	1 EA		
10	Hydration System (Camelback)	1 EA		
11	Magazine, 30 round	7 EA		
12	Pouch, 3 Magazine	2 EA		
13	Weapons Cleaning Kit	1 EA		
14	Parka, Wet Weather	1 EA		
15	Trousers, Wet Weather	1 EA		
16	Poncho	1 EA		
17	Cap, Patrol	2 EA		
18	Shirt, ACU	4 EA		
19	Trousers, ACU	4 EA		
20	Undershirt, Tan	7 EA		
21	Socks, Cushion Sole (green or black)	7 PR		
22	Boots, Tan HW	2 PR		
23	Boots, Tan CW	1 PR		
24	Belt, Trousers	1 EA		
25	ID Tags w/ long and short chain	1 SET		
26	Extra Name Tape, Rank, Flag, Patches	2 EA		
27	ID Card with PIN	1 EA		
28	Eye Protection, Ballistic, Clear	1 EA		
29	Eye Protection, Ballistic, Tinted	1 EA		
30	Ear Plugs w/ case	1 EA		
31	Knee and Elbow Pads (optional)	1 PR		
32	Assault Pack	1 EA		
33	Whistle (optional)	1 EA		
34	L-shape Flashlight w/ batteries	1 EA		
35	Jacket, Gortex or Field	1 EA		
36	Drawers, CW (NOTE 2)	1 EA		
37	Undershirt, CW (NOTE 2)	1 EA		
38	Undershirt, CW, Polypro (NOTE 2)	1 EA		
39	Personal Hygiene Kit	1 EA		
40	IPFU Jacket	1 EA		
41	IPFU Trousers	1 EA		

	ITEM	REQ	INITIALS	
			SM	SQD LDR
42	IPFU Shirt, Short Sleeve	2 EA		
43	IPFU Shirt, Long Sleeve	2 EA		
44	IPFU Shorts	2 EA		
45	Shorts, Spandex (Optional)	1 EA		
46	Socks, White, Athletic (Above ankle)	7 PR		
47	Shoes, Running	1 EA		
48	PT Cap, Grey Fleece	2 EA		
49	Gloves, Leather Utility (w/ inserts)	1 PR		
50	Beret, Black w/ unit crest	2 EA		
51	ASU or Class A Uniform (complete)	1 SET		
52	Extra Personal Hygiene Items	2 EA		
53	Towel, Bath, Brown	2 EA		
54	Wash Cloth	2 EA		
55	Shoes, Shower	1 EA		
53	Lensatic Compass	1 EA		
54	Protractor	1 EA		
55	Markers, Map, Black (fine and super fine tips)	2 EA		
56	Neck Gator	1 EA		
57	Mechanical Pencils	2 EA		
58	Black Pens	2 EA		
59	3x5 Index Cards	1 PK		
60	Weapons Cleaning Kit	1 EA		
61	Weapon Blank Adapter	1 EA		

Student Signature

First Line Supervisor Signature

1SG Signature

*NOTE 1: You will have 72 hours to make sure that you have the required packing list or you will be dropped for the course. There are no substituted items, RFI will not be accepted. If it is not on this list, don't bring it, it will be considered unauthorized. All items must be serviceable and clean.

*NOTE 2: Items only necessary during cold weather month from 1 OCTOBER – 1 April.

MSCoE NCO ACADEMY WLC PACKING LIST

RANK: SGT LAST NAME: Smuffy FIRST NAME: Joe MI: L.
 UNIT: K. Co. 159 AVN 31D

	ITEM	REQ	INITIALS	
			SM	SQD LDR
1	Bag, Duffel	1 EA		
2	Rucksack (complete w/ straps)	1 EA		
3	Bag, Barracks	2 EA		
4	Bag, Waterproof	1 EA		
5	Helmet, Advanced Combat	1 EA		
6	Cover, Helmet w/ rank	1 EA		
7	Band, Helmet w/ last name	1 EA		
8	LBV/LCE/MOLLE complete w/ 2 canteens	1 EA		
9	First Aid Kit	1 EA		
10	Hydration System (Camelback)	1 EA		
11	Magazine, 30 round	7 EA		
12	Pouch, 3 Magazine	2 EA		
13	Weapons Cleaning Kit	1 EA		
14	Parka, Wet Weather	1 EA		
15	Trousers, Wet Weather	1 EA		
16	Poncho	1 EA		
17	Cap, Patrol	2 EA		
18	Shirt, ACU	4 EA		
19	Trousers, ACU	4 EA		
20	Undershirt, Tan	7 EA		
21	Socks, Cushion Sole (green or black)	7 PR		
22	Boots, Tan HW	2 PR		
23	Boots, Tan CW	1 PR		
24	Belt, Trousers	1 EA		
25	ID Tags w/ long and short chain	1 SET		
26	Extra Name Tape, Rank, Flag, Patches	2 EA		
27	ID Card with PIN	1 EA		
28	Eye Protection, Ballistic, Clear	1 EA		
29	Eye Protection, Ballistic, Tinted	1 EA		
30	Ear Plugs w/ case	1 EA		
31	Knee and Elbow Pads (optional)	1 PR		
32	Assault Pack	1 EA		
33	Whistle (optional)	1 EA		
34	L-shape Flashlight w/ batteries	1 EA		
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37	Undershirt, CW (NOTE 2)	1 EA		
38	Undershirt, CW, Polypro (NOTE 2)	1 EA		
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40	IPFU Jacket	1 EA		
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47	Shoes, Running	1 EA		
48	PT Cap, Grey Fleece	2 EA		
49	Gloves, Leather Utility (w/ inserts)	1 PR		
50	Beret, Black w/ unit crest	2 EA		
51	ASU or Class A Uniform (complete)	1 SET		
52	Extra Personal Hygiene Items	2 EA		
53	Towel, Bath, Brown	2 EA		
54	Wash Cloth	2 EA		
55	Shoes, Shower	1 EA		
53	Lensatic Compass	1 EA		
54	Protractor	1 EA		
55	Markers, Map, Black (fine and super fine tips)	2 EA		
56	Neck Gator	1 EA		
57	Mechanical Pencils	2 EA		
58	Black Pens	2 EA		
59	3x5 Index Cards	1 PK		
60	Weapons Cleaning Kit	1 EA		
61	Weapon Blank Adapter	1 EA		

Joe Smuffy
 Student Signature

Michael Jackson
 First Line Supervisor Signature

Rito Ortiz
 1SG Signature

*NOTE 1: You will have 72 hours to make sure that you have the required packing list or you will be dropped for the course. There are no substituted items, RFI will not be accepted. If it is not on this list, don't bring it, it will be considered unauthorized. All items must be serviceable and clean.

*NOTE 2: Items only necessary during cold weather month from 1 OCTOBER – 1 April.

ENLISTED RECORD BRIEF

BRIEF DATE NAME: 20110204 SNUFFY, JOSEPH

COMPONENT: REGULAR

SECTION IV - Personal/Family Data
 Date of Birth: 19730817 Birthplace: CA
 Country of Citiz: us Sex/Race: MALE/OTHER
 No of Dependent Adults/Children: 1/1 Religion: ROMAN CATH
 Marital Status: MARRIED Spouse Birthplace/Citiz: /
 PUL-RES: 111011 Height/Weight: 66/220
 MRC1: #Cmid Sponsored: 0
 Physical Category: WF APT DT PIP Score: 200912PASSSED/231
 Last Physical Exam: 20100723 MMRB Results/DI:
 Home of Record: RICHLAND, WA
 Mailing Address: 123 MAIN ST. APT A EL PASO, TX 79920
 MIL Spouse SSN/MPC: /
 Svc Comp / DoD: /
 Emergency Data Verified Date: 20100201

SECTION III - Service Data
 SSN: XXX.XX.
 BASD: 19960229 REBD: 19960229 BESC: 19960229
 ETS: 20110306 DIEMS: 19960130 Reent. Elig/Prohib: 96
 #Days Lost: AGCM DT: 20080228 AGCM Elg DT: 20110228
 PVT PV2 PFC SPC - CPL
 DOR: 19960229 19960229 19961201 20090113
 SGT SSG SFC MSG - 1SG
 DOR: 20050101 SGM - CSM
 SGM - CSM

SECTION VII - CIVILIAN Education
 Level Completed: 1 YR COLL Yr: 2008
 DESG: COMPL ONE SEMESTER COLLEGE Yr: 2008
 Institution: Discipline: Yr: Yr: Yr:
 Institute: Discipline: Yr: Yr: Yr:
 Number of Semester Hours Completed: 20
 Technical Certification: /
 Course Name: DI Certified: DI Expires: /

SECTION VIII - Awards and Decorations
 1 JSCM MOEIN-GR M 1
 2 AFRCOM
 3 ADAM
 4 JNIA
 5 JNIA
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SECTION IX - Assignment Information
 Date of Last PCS: 20041213
 Date of Last NCOER: 20090113
 Correspondence CRS Total # Hrs: 39

ASGT	FROM	MO	UNIT NO	ORGANIZATION	STATION	LOC	COMD	DUTY TITLE	OMOS	ASI	LANG
Current	20100719	9	W09Q330	WT BN HQ EL PASO	FT BLISS	US	MC	ASSIGNED TEMP	42A10	00	YY
1st Prev	20090823	8	W1D257	6X MAIN BODY 2	FT BLISS	US	TC	HUMAN RESOURCES SPC	42A10	00	YY
2nd Prev	20090113	8	W1D22A	HQ/A BTRY 2D BN 6TH ADA	FT BLISS	US	TC	HUMAN RESOURCES SPC	42A20	00	YY
3rd Prev	20080901	4	W1D22A	HQ/A BTRY 2D BN 6TH ADA	FT BLISS	US	TC	PERSONNEL SVCS SGT	42A30	00	YY
4th Prev	20081107	2	W1D22A	HQ/A BTRY 2D BN 6TH ADA	FT BLISS	US	TC	EVALUATIONS NCO	42A20	00	YY
5th Prev	20080327	7	W1D210	HNB BTRY ADA BDE	FT BLISS	AE	BT	ADMINISTRATION NCO	42A20	00	YY
6th Prev	20050209	12	W6SCLAA	USA CFC - AFGHANISTAN	KABUL	AE	BT	ADMINISTRATION NCO	42A10	00	YY
7th Prev	20040103	2	W6SCLAA	USA GARRISON FT BLISS	FT BLISS	US	BA	HUMAN RESOURCES SPC	42A10	00	YY
8th Prev	20030324	12	W6SCLAA	USA GARRISON FT BLISS	FT BLISS	KU	FC	HUMAN RESOURCES SPC	7EHI0	00	YY
9th Prev	20010615	21	WELDA3	6546 AG PERS DET	CAMP DONA	US	FC	PERSONNEL SERVICE SPC	11B10	00	YY
10th Prev	19990928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC	AUTOMATIC RIFLEMAN	11B10	00	YY
11th Prev	19980928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC	OSUT	11B00	00	YY
12th Prev	19980928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC	ENLISTMENT	11B00	00	YY
13th Prev	19980928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC				
14th Prev	19980928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC				
15th Prev	19980928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC				
16th Prev	19980928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC				
17th Prev	19980928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC				
18th Prev	19980928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC				
19th Prev	19980928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC				
20th Prev	19980928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC				
21st Prev	19980928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC				
22nd Prev	19980928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC				
23rd Prev	19980928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC				
24th Prev	19980928	21	WELDA3	6546 AG PERS DET	FT BLISS	US	FC				

SECTION X - Remarks
 HIV YRMO: 2009093
 RGMT AFL CORPAG
 Date Last Photo: /
 TRCNO3: GPOBCD TRCNOAD FYCAL

THE ARMY SCHOOL SYSTEM (TASS) UNIT PRE-EXECUTION CHECKLIST

(FOR USE OF THIS FORM SEE TRADOC REG 350-18; PROPONENT IS DCSOPS&T, TASSD)

Please print or type.

1. **NAME:** Snuffy, Joe

2. **UNIT:** K. CO. 159TH AVN 3RD ID

3. **DOR:** 01 Feb 08

4. **COURSE TITLE:** WARRIOR LEADER COURSE

5. **REPORT DATE:** 10 FEB 08

First line leader's initials	Soldier's initials	PART I - UNIT PRE-EXECUTION (D-90 to D-1)
JR	JS	Coordination between customer unit and TASS unit to identify the Soldier by name?
JR	JS	Soldier in receipt of school/course information?
JR	JS	Read ahead packets/prerequisite testing complete? (If applicable.)
JR	JS	All required clothing/equipment IAW school/course information packet?
JR	JS	Soldier demonstrated physical fitness requirement on diagnostic test administered within 30 days of scheduled departure for school? (As required.)
JR	JS	Soldier meets standards of AR 600-9?
JR	JS	Transportation requirements completed?
JR	JS	Adequate cash/traveler checks/Government Credit Card?
JR	JS	Individual orders received?
JR	JS	Individual has current periodic physical (within 5 years)?
JR	JS	Individual meets remaining TIS requirements?
JR	JS	School mailing address/telephone numbers received? (For family.)
JR	JS	Ten (10) copies of orders?
JR	JS	Transportation verified/approved (ticket picked up)?
JR	JS	Current/valid identification card?
JR	JS	ID tags (1 pair)?
JR	JS	If applicable: Soldier requiring corrective lenses has a set of military prescription eyeglasses and protective mask inserts?
JR	JS	Notify soldier of requirement to take APFT and be weighed, as required?

Unit POC List:

CDR: B: (123) 555-0111 H: ()

1SG: B: (123) 555-0011 H: ()

FTM: B: () H: ()

Unit POC FAX: (123) 555-0001

Unit POC E-mail: JANE.SNAIL@US.ARMY.MIL

PART II - ROUTINE PREREQUISITES

TASK	REGULATION DATA					SOLDIER DATA						
Minimum Aptitude Score (ASVAB) (if applicable)	CO	CL	FA	GM	MM	CO	CL	FA	GM	MM		
	95	95	95	95	94	95	96	96	97	98		
	OF	EL	SC	ST	GT	OF	EL	SC	ST	GT		
	96	94	95	96	97	95	94	96	97	98		
Color vision requirements (if applicable)												
Physical demand rating/profile (PULHES)	P	U	L	H	E	S	P	U	L	H	E	S
*See Part III for P/T profiles	1	1	1	1	1	1	1	1	1	1	1	1

Prerequisite phase/course attendance (if applicable): _____ School code _____ Course completed _____
 Date of completion _____ Phase completed _____

Military and civilian vehicle operator license(s) (if applicable): _____

Military license number: S0123

Expiration date: 01 MAR 12

Civilian license number: 12345678

Expiration date: 01 MAR 12

State: TX

PART III - REQUIRED DOCUMENTS

Security clearance (if applicable, attach as required)

*Permanent profile attendees (if applicable): AC & AGR must have copy of MRB (P3, P4) results with completed DA Form 3349 (must include Army doctor-approved alternate aerobic event for APFT). TPU/Traditional Guardsmen must have copy of completed DA Form 3349 (must include Army doctor-approved alternate aerobic event for APFT).

All required waivers (if applicable)

Other requirements (if applicable)

OTHER REQUIREMENTS OF DA PAM 611-21 NOT PREVIOUSLY LISTED:

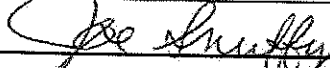
Other requirements (if applicable)

Other requirements (if applicable)

Other requirements (if applicable)

Other requirements (if applicable)

I have been counseled and have read all requirements applicable to the course I'm selected to attend. Attendance at this course and class will not pose any known hardship on me and/or my family that would detract from or prevent my successful completion of course requirements.

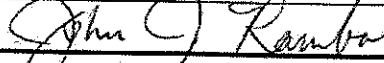
Student's Signature: 

Date: Within 30 days

I have reviewed the above soldier's qualifications and potential to successfully complete this course, counseled them on these requirements, and hereby verify their readiness to attend.

Commanding Officer (typed name): JOHN J. RAMBO CPT, IN, COMMANDING

Date: Within 30 days

Signature: 

Army Physical Fitness Test Scorecard

For use of this form, see TC 3-22.20; the proponent agency is TRADOC.

NAME (Last, First, MI)
Snuffy, Joe A.
GENDER
Male
UNIT
HQ BTRY, 2-6 ADA

TEST ONE				TEST TWO				TEST THREE				TEST FOUR			
DATE	GRADE	AGE	AGE	DATE	GRADE	AGE	AGE	DATE	GRADE	AGE	AGE	DATE	GRADE	AGE	AGE
	E-4	30													
HEIGHT (IN INCHES) 69	BODY COMPOSITION WEIGHT: 160 lbs GO / NO-GO <input checked="" type="checkbox"/> <input type="checkbox"/>		BODY FAT: % GO / NO-GO <input type="checkbox"/> <input type="checkbox"/>	HEIGHT (IN INCHES)	BODY COMPOSITION WEIGHT: lbs GO / NO-GO <input type="checkbox"/> <input type="checkbox"/>		BODY FAT: % GO / NO-GO <input type="checkbox"/> <input type="checkbox"/>	HEIGHT (IN INCHES)	BODY COMPOSITION WEIGHT: lbs GO / NO-GO <input type="checkbox"/> <input type="checkbox"/>		BODY FAT: % GO / NO-GO <input type="checkbox"/> <input type="checkbox"/>	HEIGHT (IN INCHES)	BODY COMPOSITION WEIGHT: lbs GO / NO-GO <input type="checkbox"/> <input type="checkbox"/>		BODY FAT: % GO / NO-GO <input type="checkbox"/> <input type="checkbox"/>
PU RAW SCORE 60	INITIALS JM	POINTS 82	POINTS	PU RAW SCORE	INITIALS	POINTS	POINTS	PU RAW SCORE	INITIALS	POINTS	POINTS	PU RAW SCORE	INITIALS	POINTS	POINTS
SU RAW SCORE 65	INITIALS JM	POINTS 82	POINTS	SU RAW SCORE	INITIALS	POINTS	POINTS	SU RAW SCORE	INITIALS	POINTS	POINTS	SU RAW SCORE	INITIALS	POINTS	POINTS
2MR RAW SCORE 1400	INITIALS JM	POINTS 92	POINTS	2MR RAW SCORE	INITIALS	POINTS	POINTS	2MR RAW SCORE	INITIALS	POINTS	POINTS	2MR RAW SCORE	INITIALS	POINTS	POINTS
ALTERNATE AEROBIC EVENT	TOTAL POINTS 256		TOTAL POINTS	ALTERNATE AEROBIC EVENT	TOTAL POINTS		TOTAL POINTS	ALTERNATE AEROBIC EVENT	TOTAL POINTS		TOTAL POINTS	ALTERNATE AEROBIC EVENT	TOTAL POINTS		TOTAL POINTS
TIME GO <input type="checkbox"/> NO-GO <input type="checkbox"/>	NCO/IC SIGNATURE MARTINEZ, JASON ALLEN, 118828522		NCO/IC SIGNATURE	TIME GO <input type="checkbox"/> NO-GO <input type="checkbox"/>	NCO/IC SIGNATURE		NCO/IC SIGNATURE	TIME GO <input type="checkbox"/> NO-GO <input type="checkbox"/>	NCO/IC SIGNATURE		NCO/IC SIGNATURE	TIME GO <input type="checkbox"/> NO-GO <input type="checkbox"/>	NCO/IC SIGNATURE		NCO/IC SIGNATURE
COMMENTS Must be within 30 days of enrollment date	COMMENTS		COMMENTS	COMMENTS	COMMENTS		COMMENTS	COMMENTS	COMMENTS		COMMENTS	COMMENTS	COMMENTS		COMMENTS

SPECIAL INSTRUCTION: USE INK

LEGEND: PU - PUSH UPS 2MR - 2 MILE RUN
SU - SIT UPS APFT - ARMY PHYSICAL FITNESS TEST

DA FORM 705, MAY 2010

PREVIOUS EDITIONS ARE OBSOLETE.

BODY FAT CONTENT WORKSHEET - (Male)

For use of this form, see AR 600-9; the proponent agency is DCS, G-1

NAME (Last, First, Middle Initial) SNUFFY, JOE			RANK SGT		NOTE: 1/4" = .25 1/2" = .50 3/4" = .75
HEIGHT (to nearest 0.50 inch) 67.00		WEIGHT (to nearest pound) 185		AGE 31	
STEP		FIRST	SECOND	THIRD	
1. Measure abdomen at the level of the navel (belly button.) Round down to the nearest 0.50 inch. (Repeat 3 times.)		36.50	36.50	37.00	36.50
2. Measure neck just below the level of larynx (Adam's apple) Round up to the nearest 0.50 inch. (Repeat 3 times.)		16.50	16.00	16.00	16.00
3. Enter the average abdominal circumference.					36.50
4. Enter the average neck circumference.					16.00
5. Enter circumference value (step 3 - step 4).					20.50
6. Find the height in Table 3-1 (Height Factor). Enter height in inches.					67.00
7. Find the Soldier's circumference value (step 5) and height (step 6) in figure B-5 (Percent Fat Estimation for Men). Enter the percent body fat value that intercepts with the circumference value and height. This is the Soldier's Percent Body Fat.					22.00
REMARKS					

Authorized Body Fat % 24.00%
Over/Under -2.00%

NOTE: Must be within 30 days of enrollment.

CHECK ONE

- Individual is in compliance with Army Standards; is not in compliance with the standards
 Recommended monthly weight loss is 3-8 lbs.

PREPARED BY (Signature) <i>Jason A. Martinez</i>	RANK SFC	DATE (YYYYMMDD) See note	APPROVED BY SUPERVISOR (Printed Name and Signature) <i>Joe Dotson</i>	RANK SFC	DATE (YYYYMMDD) See note
MARTINEZ, JASON A.			DOTSON, JOEY		

M

TAB

TAB

TAB

TAB

BODY FAT CONTENT WORKSHEET - (Female)

For use of this form, see AR 600-9; the proponent agency is DCS, G-1.

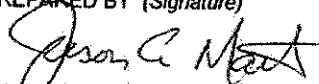

NAME (Last, First, Middle Initial)		RANK			NOTE: 1/4" = .25 1/2" = .50 3/4" = .75
SNUFFY, JOSEPHINE		SPC			
HEIGHT (to nearest 0.50 inch)	WEIGHT (to nearest pound)	AGE			
64.00	155	30			
STEP	FIRST	SECOND	THIRD	AVERAGE (to nearest 0.50 in.)	
1. Measure neck just below level of larynx (Adam's apple) up to nearest 0.50 inch. Repeat three times, then average.	14.00	14.00	14.00	14.00	
2. Measure waist (abdomen) at the point of minimal abdominal circumference. Round down to the nearest 0.50 inch. Repeat three times, then average.	30.00	30.00	30.00	30.00	
3. Measure hips at point where the gluteus muscles (buttocks) protrude backward the most. Round down to nearest 0.50 inch. Repeat three times, then average.	39.00	39.00	39.00	39.00	
4. CALCULATIONS		REMARKS			
A. Enter average waist circumference	30.00	Authorized Body Fat % <u>34.00%</u> Over/Under <u>-5.00%</u> NOTE: Must be within 30 days of enrollment			
B. Enter average hip circumference	39.00				
C. TOTAL (4A + 4B)	69.00				
D. Enter average neck circumference	14.00				
E. Enter circumference value (4C - 4D)	55.00				
F. Find the height in Table 3-1 (Height Factor). Enter height in inches.	64.00				
G. Find the Soldier's circumference value (line 4E) and height (line 4F) in Figure B-6 (Percentage Fat Estimation for Women). Enter the body fat value that intercepts with the circumference value and height. This is the Soldier's Percent Body Fat.	29.00				

CHECK ONE

 Individual is in compliance with Army Standards;

 is not in compliance with the standards

 Recommended monthly weight loss is 3-8 lbs.

PREPARED BY (Signature)	RANK	DATE (YYYYMMDD)	APPROVED BY SUPERVISOR	RANK	DATE (YYYYMMDD)
					
MARTINEZ, JASON A.	SFC	See note	DOTSON, JOEY	SFC	See note

DA FORM 5501, JUL 2010

Previous Editions are Obsolete

APD PE v1.00ES

PHYSICAL PROFILE

For use of this form, see AR 40-501; the proponent agency is the Office of the Surgeon General.

1. MEDICAL CONDITION: (Description in lay terminology) <input checked="" type="checkbox"/> INJURY? Or <input type="checkbox"/> ILLNESS/DISEASE? Back Pain	2. CODES (Table 7-2 AR 40-501)	3. Temporary Permanent	P	U	L	H	E	S
			1	1	2	1	1	1

4. PROFILE TYPE		YES	NO
a. TEMPORARY PROFILE (Expiration date YYYYMMDD) (Limited to 3 months duration)		<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. PERMANENT PROFILE (Reviewed and validated with every periodic health assessment or after 5 years from the date of issue)		<input checked="" type="checkbox"/>	<input type="checkbox"/>

5. FUNCTIONAL ACTIVITIES THAT EVERY SOLDIER REGARDLESS OF MOS MUST BE ABLE TO PERFORM. IF SOLDIER CANNOT PERFORM ANY ONE OF THESE TASKS, THEN THE PULHES MUST CONTAIN AT LEAST ONE "3" AND SOLDIER MUST BE REFERRED TO A MEB. CAN THE SOLDIER:

FUNCTIONAL ACTIVITY:	YES	NO
a. Carry and fire individual assigned weapon?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Evade direct and indirect fire?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Ride in a military vehicle for at least 12 hours per day?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Wear a helmet for at least 12 hours per day?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e. Wear body armor for at least 12 hours per day?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. Wear load bearing equipment (LBE) for at least 12 hours per day?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Wear military boots and uniform for at least 12 hours per day?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Wear protective mask and MOPP 4 for at least 2 continuous hours per day?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. Move 40lbs (for example, duffie bag) while wearing usual protective gear (helmet, weapon, body armor and LBE) at least 100 yards?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
j. Live in an austere environment without worsening the medical condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

6. APFT	YES	NO	ALTERNATE APFT (Fill out if unable to do APFT run otherwise N/A)	N/A	YES	NO
2 MILE RUN	<input type="checkbox"/>	<input checked="" type="checkbox"/>	APFT WALK	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
APFT SIT-UPS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	APFT SWIM	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
APFT PUSH UPS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	APFT BIKE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

7. DOES THE SOLDIER MEET RETENTION STANDARDS IAW CHAPTER 3 AR 40-501?

YES NEEDS MMRB NO NEEDS MEB

8. FUNCTIONAL LIMITATIONS AND CAPABILITIES AND OTHER COMMENTS:

Marching at own pace and distance.

Undergoing treatment

This temporary profile is an extension of a temporary profile first issued on _____

9. NAME, GRADE & TITLE OF PROFILING OFFICER Jane Snail, CPT, DO	10. SIGNATURE 	11. DATE (YYYYMMDD) 2112 01 01
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12. NAME & GRADE OF APPROVING AUTHORITY John J. Rambo, CPT, IN, Commanding	13. SIGNATURE 	14. DATE (YYYYMMDD) 2012 01 01
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15. Commanders can access the electronic profiles of Soldiers in their unit(s) by going to <http://www/mods.army.mil/> and clicking on eProfile in the list of applications. Commanders will be required to register and be approved in eProfile before they can gain access to profiles.

16. PATIENT'S IDENTIFICATION	17. HOSPITAL OR MEDICAL FACILITY
a. NAME: (Last, First) Snuffy, Joe	FMRC
b. GRADE/RANK: E-5/SGT	
c. SSN: 123456789	
d. UNIT: K Co., 159th AVN, 3rd ID	
18. PROFILING OFFICER E-MAIL jane.snail@us.army.mil	

CERTIFICATE of COMPLETION

This is to certify that:

JOE SNUFFY

successfully completed

Lesson Template Title - Structured Self-Development - Level 1 (SSDI)_Module 01_Exam

Lesson Template Id -

Product Director
Distributed Learning System

CERTIFICATE of COMPLETION

This is to certify that:

JOE SNUFFY

successfully completed

Lesson Template Title - Structured Self-Development - Level 1 (SSDI)_Module 02_Exam

Lesson Template Id -

Product Director
Distributed Learning System

CERTIFICATE of COMPLETION

This is to certify that:

JOE SNUFFY

successfully completed

Lesson Template Title - Structured Self-Development - Level 1 (SSDI)_Module 03_Exam
Lesson Template Id -

Product Director
Distributed Learning System

CERTIFICATE of COMPLETION

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JOE SNUFFY

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Lesson Template Title - Structured Self-Development - Level 1 (SSDD)_Module 04_Exam

Lesson Template Id -

Product Director
Distributed Learning System