

General Brehon B. Somervell Coin-Medallion (Medal) of Excellence Questionnaire/Checklist

1. RANK/NAME OF AWARD RECIPIENT: _____

2. TYPE OF AWARD (CIRCLE ONE): **RETIREMENT OR LIFETIME ACHIEVEMENT?**

IF IN LIEU OF PCS, WHAT PCS AWARD IS THE CANDIDATE RECOMMENDED FOR? (CIRCLE ONE): **DSM LM MSM ARCOM AAM OTHER:** _____

3. CURRENT UNIT/LOCATION: _____

4. AWARD MAILING ADDRESS: _____

5. DUTY TITLE: _____

6. BASIC ACTIVE SERVICE DATE/YEARS OF FEDERAL SERVICE: _____

7. HAS ERB/ORB BEEN UPDATED WITHIN THE LAST 30 DAYS (CIRCLE ONE): **YES OR NO**

8. HAS CANDIDATE RECEIVED ANY REGIMENTAL HONORARY RECOGNITION, i.e., HORATIO GATES, SAMUEL SHARP, ORDER OF SAINT MARTIN (CIRCLE ONE)? **YES OR NO** IF SO, LIST BELOW.

NAME OF AWARD	DATE RECEIVED	LEVEL
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. DATE OF LAST APFT: _____ (CIRCLE ONE): **GO / NO GO**

10. DOES AWARD RECIPIENT MEET HEIGHT & WEIGHT STANDARDS IN ACCORDANCE WITH AR 600-9? (CIRCLE ONE): **YES OR NO**

11. DATE OF LAST WEIGH-IN: _____ (CIRCLE ONE): **GO / NO GO**

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12. DOES CANDIDATE HAVE EXPERIENCE IN TWO OR MORE AREAS OF SUSTAINMENT EMPHASIZING MULTIFUNCTIONAL SUPPORT (FI, HR, JAG, OD, QM, TC). (CIRCLE ONE): **YES**

OR NO

DISCLAIMER: I, the undersigned, certify that to the best of my knowledge, the information provided in this award recommendation is correct and most accurate. I understand that misrepresentation is grounds for disqualification from current or future consideration for this prestigious logistician award.

PRINT NAME: _____ SIGN: _____

