NOTIFICATION MEMORANDUM REQUIRING ADMINISTRATIVE BOARD PROCEDURES

For use of this form, see FK Pam 635-200

DEPARTMENT OF THE ARMY

_____ (Office Symbol)

_____ (Date)

MEMORANDUM FOR _____
(Soldier's name, SSN, grade, and unit)

SUBJECT: Separation Under AR 635-200, Chapter _____
(Enter appropriate chapter)

1. Under the provisions of AR 635-200, chapter _____, section _____, paragraph _____, I am initiating action to separate you for _____ (indicate narrative reason).
The reasons for my proposed action are: *(state specific, factual details which constitute the basis for the proposed action).*

2. I am recommending that you receive ☐ **a characterization of service** ☐ **an entry level separation.** The intermediate commander(s) and the separation authority are not bound by my recommendation as to characterization of service. The separation authority in your case is _____. The separation authority may
(cite unit designation of separation authority)
direct that your service be characterized as honorable, under honorable conditions, under other than honorable conditions, or you may receive an entry level separation (uncharacterized) if you are in an entry-level status. However, the separation authority may not direct the issuance of a type of discharge or characterization of service less favorable than that recommended by the board should you request a hearing before an administrative board.

3. If my recommendation is approved, the proposed separation could result in ☐ discharge, ☐ release from active duty to a Reserve Component (see para 1-34), or ☐ release from custody and control of the Army.

4. You have the right to consult with consulting counsel and/or civilian counsel at no expense to the Government within a reasonable time (not less than 3 duty days).

5. You may obtain copies of documents that will be sent to the separation authority supporting the proposed separation. (Classified documents may be summarized.)

DATA REQUIRED BY THE PRIVACY ACT OF 1974 (5 USC 552a)

AUTHORITY: 10 U.S.C 1169, 3013, 12313(a), and 12681; 42 U.S.C 10606 et seq.; DoD Directive 1030.1; and E.O. 9397 (SSN).

PURPOSE: To be used by commander exercising separation authority over the soldier to determine approval or disapproval of his/her request for conditional waiver and, in case of disapproval, to indicate the soldier's options concerning rights available to him/her in contemplated administrative separation cases.

ROUTINE USES: Information provided in the statement is used by processing activities and the approval authority to determine what rights the soldier desires to exercise and the offering of such rights as indicated. Upon completion of processing actions, the statement is filed in the MPRJ. As long as filed in the MPRJ, the personal information may be used by other appropriate Federal agencies and State and local government authorities where the use of the information is compatible with the purpose for which the information is collected.

DISCLOSURE: Disclosure is voluntary. If the information is not provided, the Army will complete processing using information available.

6. You may request a hearing before an administrative board, or you may present written statements instead of board proceedings.

7. You may request appointment of military counsel for representation. You may also retain civilian counsel at no expense to the Government.

8. You may waive the rights listed above in paragraphs 4, 5, 6, and 7 in writing and you may withdraw any such waiver at any time prior to the date the separation authority orders, directs, or approves your separation.

9. You may submit a conditional waiver of your right to have your case heard by an administrative separation board.

*10. You are required to undergo a complete medical examination in accordance with AR 40-501. Arrangements have been made for this examination and you are to report to _____ at _____
(Location) (Time)
on _____
(Date)

*11. You are required to undergo a mental status evaluation in accordance with AR 40-501. Arrangements have been made for this examination and you are to report to _____ at _____
(Location) (Time)
on _____
(Date)

12. Execute the attached acknowledgment (FK Form 9583-E) and return it within 7 duty days from the date of your receipt of this memorandum. Any statement you desire to submit in your behalf must reach me within 7 duty days after you receive this memorandum, unless you request and receive an extension for good cause shown. Unless an extension is granted, failure to respond within 7 duty days will constitute a waiver of the rights in paragraphs 4, 5, 6, and 7.

Encl(s)

_____
(Commander's Signature)

_____
(Typed Name, Grade, and Branch)

NOTE:
*To be used when required by paragraph 1-32.