



# National Guard

## Senior Enlisted Leadership Bench

### Program Calendar Year 2024 - 2025

### Application

Last Name:

State:

\*Select the state of your Wing/Home Unit

First Name:

Wing:

\*Stat Tour: Enter your directorate

Middle Name:

Unit:

\*Stat Tour: Enter your office symbol

Rank:  DOR:

DoD ID:

\*ADOS: Select your actual status  
Status:

Component:

Duty Title:

Work Phone:

Education Level:

Cell Phone:

Last PME:

Military Email:

EJPME II:

Personal Email:

Primary MOS/AFSC:  2nd:  3rd:

Rank/Name of Rater:

Rank/Name of Senior Rater:

MSD (Age 60 Date):

Do you have a referral evaluation on file?

Highest Military Award:

What are you applying for?

Date of Award:

\*If you apply for assignments, you are automatically enrolled in executive-level education  
Are you assigned or projected to a Joint Position?

Deployments:

Special Considerations:

*I certify, to the best of my knowledge and belief, that all of the information provided on this application is accurate, complete, and made in good faith. I meet the retention standards of NGR 600-200, AGR eligibility requirements IAW AR 135-18 and/or Statutory requirements IAW ANGI 36-6. I agree, I must be able to enter an assignment on short notice and could be expected to perform up to three years in an assignment depending on mission requirements. I understand that any information provided may be investigated at any time, and if falsified, is grounds for rejection and may lead to punishment under the Uniform Code of Military Justice (UCMJ). I understand the information provided above must be reflected on my enlisted record brief or enlisted selection brief.*

Applicant Signature