

**BY ORDER OF THE
CHIEF, NATIONAL GUARD BUREAU**

**AIR NATIONAL GUARD
INSTRUCTION 38-401**



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Manpower & Organization

SUGGESTION PROGRAM

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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This instruction implements Department of Defense (DoD) 1400.25-M, DoD Civilian Personnel Manual, Subchapter 451, Award. It gives the directive requirements for the Air National Guard Suggestion Program. This instruction applies to all Air National Guard (ANG) military and competitive technicians, active military members including Traditional Guardsmen, and the Active Guard/Reserve (AGR) members. ANG Title 5 and Title 10 employees fall under the Air Force (AF) Innovative Development through Employee Awareness (IDEA) Program and should submit their ideas through their servicing area manpower idea office. The Suggestion Program rewards Airmen for their ideas on how to increase productivity or work efficiency which saves the ANG and AF money and resources.

NOTICE: This publication will be used for the Air National Guard (ANG) military members or National Guard technicians employed under Title 32, United States Code (U.S.C.) 709.

Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using the AF Form 847, *Recommendation for Change of Publication*; route AF Form 847s from the field through the appropriate functional's chain of command. Ensure that all records created as a result of processes prescribed in this publication are maintained in accordance with Air Force Manual (AFMAN) 33-363, *Management of Records*, and disposed of in accordance with Air Force Records Information Management System (AFRIMS) Records Disposition Schedule (RDS) located at <https://www.my.af.mil/gcss-af61a/afirms/afirms>.

SUMMARY OF CHANGES

This publication has been substantially revised and must be completely reviewed. This publication has been updated to reflect changes in guidance and procedures dealing with the Suggestion Program.

Chapter 1

GENERAL

1.1. Purpose. This instruction prescribes policies and procedures for administering and managing the ANG Suggestion Program. It also gives instructions on the submission and eligibility of suggestions, explains evaluation and disposition procedures, and provides guidance for the payment of awards. Awards are based on the merits of the contribution and benefits that accrue without regard to race, color, religion, sex, marital status, national origin, physical handicap, age, political affiliation, or union membership affiliation or participation. Supplementation of this regulation and establishment of local forms are prohibited without prior approval from the NGB/A1MM/Operating Location TN [OLTN]. Supplements will not change the intent of the governing instruction.

1.2. Responsibilities:

1.2.1. The Chief, National Guard Bureau. The Chief, National Guard Bureau (NGB) is responsible for the overall administration, improvement, and evaluation of the National Guard Suggestion Program. This responsibility has been delegated to NGB/A1MM/OLTN Suggestion Program Manager for ANG suggestions.

1.2.2. The Air National Guard. The NGB/A1MM/OLTN Suggestion Program Manager (SPM) interprets policy and provides guidance to the states'/territories' Human Resources Office (HRO) SPMs. The NGB SPM ensures that the states/territories uniformly apply suggestion policy. The NGB SPM develops appropriate supplements, policies, and plans; conducts training workshops; decides disputed cases; determines the final eligibility and award amount; has the authority to award and reviews direct inquiries from participants.

1.2.3. State Adjutant Generals. The State Adjutant Generals are responsible for assuring compliance with program requirements, promoting and supporting the Suggestion Program, and ensuring that prompt action is taken on awards.

1.2.4. Unit Commanders. Unit Commanders budget for and ensure that the unit promptly pays suggestion awards, designate a SPM, and establish procedures to verify that their unit implements suggestions.

1.2.5. HRO SPMs. State SPMs administer and publicize the Suggestion Program; acts as second line evaluator; provide advice, assistance, and training to supervisors on the effective use and participation in the program; provide training and/or orientation to all technicians and military members on how to submit suggestions; ensure that all suggesters are kept informed of the status of their suggestion; evaluation is performed within prescribed time limits; and ensure that all suggestions meet eligibility requirements.

1.2.6. Unit Level SPM. The Quality Assurance (QA) Office acts as the Unit Level SPM. The Unit Level SPMs (QA) receive, control, and evaluate suggestions; responsible for administering and publicizing the Suggestion Program at the unit level; providing guidance and acting as the first line evaluators.

Chapter 2

DETERMINING ELIGIBILITY AND SUBMITTING SUGGESTIONS

2.1. Suggestion Eligibility Criteria. Any individual, team, or group within the ANG may submit a suggestion. An idea does not become a suggestion until a person submits it on an AF Form 1000, *Idea Application*, (attachment 2) and it meets the following criteria:

2.1.1. A suggestion must outline a specific area for improvement, state a workable solution, and incorporate expected benefits with documentation of validated savings.

2.1.2. A suggestion must be the suggester's own thoughts or a new application of an old principle. It may be a patented idea, invention, or scientific achievement.

2.1.3. Suggesters must sign the AF Form 1000, agreeing that the US Government may use their suggestions, once awarded, without incurring further claims by suggesters, their heirs, or any other persons.

2.1.4. Suggestions are ineligible if they are vague, incomplete, deal with generalities or opinions, or appear to be a personal complaint or criticism.

2.2. Types of Suggestions. New Suggestions come in three different types, Stand-Alone, Confirmatory, and After-the-Fact.

2.2.1. Stand Alone Suggestions. Stand-Alone refers to ALL suggestions which do not have a separate improvement process document, such as an AFTO Form 22, *Technical Manual (TM) Change Recommendation and Reply*. Stand-Alone suggestions identify tangible/intangible savings to the ANG and/or the Air Force. Tangible Savings are savings which are measurable or touchable. Stand-Alone suggestions require an AF Form 1000 completed by the suggester, AF 1000-1 completed by unit level evaluation and a Job Responsibility Determination Statement. Suggesters must sign and date. All issues must be resolved before submitting a suggestion. When processing Stand-Alone Suggestions, they must have a local unit evaluation completed front and back using AF Form 1000 (attachment 2), AF Form 1000-1, *Idea Evaluation and Transmittal*, (attachment 3), and a Job Responsibility Determination (JRD) Statement (attachment 4) completed for each suggester by his/her supervisor. Refer to the Base and HRO Evaluator Checklist (attachment 5).

2.2.2. Confirmatory and After the Fact Suggestions. The term "confirmatory" refers to all separate improvement process documents, which establish ownership and identify tangible savings/intangible benefits on the form. Confirmatory Suggestions do not require unit level evaluation. All suggestions that affect a Technical Order must be processed as an AFTO Form 22, before attaching a suggestion. All issues must be resolved before submitting a suggestion. The AF Form 1000 must be submitted within 30 days of receipt. All other separate improvement processes, such as the AF Form 1067, *Modification Proposal*, and the AF Form 847 will be considered after-the-fact suggestions.

2.2.2.1. Suggesters may request waivers to the 30-day confirmatory time limit. The request must be in writing to the SPM and identify the person to whom the proposal was made. Suggesters must provide the reason they were unable to submit an AF Form 1000 within 30 days.

2.2.2.2. Processing Confirmatory Suggestions. Approved separate improvement process forms must be attached to an AF Form 1000 for recognition through the ANG Suggestion Program. The AF Form 1000 must be submitted within 30 days of date of approval of the separate improvement process document.

2.2.3. All Suggestions are processed through the State HRO SPM. All issues must be resolved before submitting a suggestion.

2.3. Retaining Ownership Rights. Ownership is determined by the first suggestion/idea to reach the final approval authority. The suggester retains ownership of a suggestion for 1 year after final approval/disapproval action. When a suggestion is withdrawn, the suggester does not retain the 1-year ownership allowed by this paragraph.

Chapter 3

EVALUATION PROCEDURES

3.1. Evaluating Suggestions:

3.1.1. A suggestion that needs MAJCOM, Air Force, or other federal agency approval requires a unit level evaluation performed by the QA. The evaluation analysis will state how it affects local procedures and identify the next-level evaluator. Evaluators complete an AF Form 1000-1 for each evaluation. (see attachment 3 & 5)

3.1.1.1. Both the evaluator and responsible official must sign the form.

3.1.1.2. To approve or disapprove a suggestion, the responsible official must have the authority to implement the suggestion.

3.2. Meeting Total Processing Time. Good Suggestions directly affect efficiency and effectiveness of the NGB and other federal agencies. Evaluators must make every effort to ensure suggestions receive the same timely and positive responses given any other suspended communication. Decisions must be fully justified or the evaluation will be considered incomplete.

3.2.1. Unit Level SPM (QA) Total processing time must not exceed 30 calendar days. Unit processing time starts when the unit SPM receives the suggestion and ends when the unit SPM notifies the submitter that the suggestion is approved, in concurrent (approval pending implementation) status, being forwarded to the next evaluation level, State HRO SPM.

3.2.2. HRO Level. Total processing time must not exceed 10 calendar days. HRO processing time starts when the HRO SPM receives the suggestion package and ends on the date the HRO SPM refers the package to the NGB/A1MM/OLTN SPM for higher level evaluation. When the suggestion package is returned to the HRO for final processing, total processing time of the award or disapproval must not exceed 10 calendar days.

3.2.3. NGB/A1MM/OLTN. Total processing time must not exceed 60 calendar days. Processing time starts when the NGB/A1MM SPM refers the package for higher level evaluation.

3.2.4. NGB/ANG Level Evaluator. Must complete evaluation within 30 working days of receipt of notification. When NGB/ANG Evaluator approves the suggestion, notification of approval, identification of intangible/tangible benefits and recommends wider use, the suggestion will be approved and forwarded to Air Force Level for further approval.

3.3. Determining Job Responsibility. The reporting official/supervisor determines job responsibility based on the merits of each suggestion. As a general rule, suggestions from unit level that must be approved and implemented at command or higher level normally are not job responsibility. The same rationale applies for command personnel when approval authority is at Headquarters Air Force or higher. (Attachment 4)

Chapter 4

AWARDS

4.1. Awards Approval Authority. State Adjutant Generals may approve cash awards up to and including \$3,000 for locally adopted suggestions only resulting in tangible/intangible benefits or a combination of both. Cash awards for locally approved suggestions in excess of \$3,000 will be sent to NGB/A1MM.

4.1.1. All cash awards must be accompanied with a suitable Award Certificate.

4.2. Meeting Eligibility for Cash Awards:

4.2.1. All Title 32 military members and Federal civilian employees paid from appropriated funds are eligible for cash awards.

4.2.2. Military and Federal civilian retirees are eligible if they submitted their suggestions prior to their retirement date.

4.3. Granting Cash Awards. Grant cash awards under the following conditions:

4.3.1. ANG or Air Force implements the suggestion or the OPR provides written certification that the suggestion will be implemented on a specific date.

4.3.2. If the suggestion is implemented locally, the NGB/A1MM/OLTN SPM may consider an award for the local tangible savings or intangible benefits. Consider an additional award if ANG or the Air Force implements the suggestion at a higher level for wider application.

4.3.3. Approved AFTO Forms 22 "Corrections" will receive a \$100 award and "Improvements" will receive a \$200 award unless tangible savings have been noted. NOTE: There are no tangible savings with "Corrections."

4.4. Award Types. Recognition may be either a monetary or a non-monetary award, but may not be a time-off award. All cash awards are subject to applicable tax rules.

4.4.1. Individual Suggester:

4.4.1.1. Tangible Savings. Award will be 15 percent of estimated first-year savings, total award will be no more than \$10,000.

4.4.1.2. Intangible Benefits. Award will be \$200 (limited to one award per approved suggestion). EXCEPTION: AFTO Forms 22 "Corrections" will receive \$100.

4.4.2. Multiple (Team/Group) Suggesters. If an individual declines a share of the award, that share will be subtracted from the total award.

4.5. Paying Awards. Pay cash awards for suggestions only for actual improvements and benefits to the Government. Apply awards payment scales equally to all who are eligible for cash awards. To calculate savings and benefits or award payment, always round up to the nearest dollar.

4.5.1. Confirmatory and After-the-Fact Intangible Benefits. The HRO SPMs process the awards. Finance awards from the Operations and Maintenance Fund to which the individual was assigned at the time the suggestion was submitted. Federal Regulation 5 C.F.R. 451.103(c)(1) requires funding to be available for paying suggestion awards. Use a SF 50-B

to pay technicians and a SF 1034 to pay AGRs and traditional guardsmen. The unit finance office cuts an electronic SF1034 to pay AGRs and traditional guardsmen. This SF1034 is transmitted to DFAS in Denver. The HRO SPM sends copy of the SF50 to NGB/A1MM to close out file.

4.5.2. Stand-Alone and Locally Approved Suggestions. NGB/A1 will be responsible for identifying funding source for cash awards when the Suggestion benefits the ANG and is adopted for implementation described in 4.4.1.1., and cash awards for locally approved suggestions in excess of \$3000. The HRO SPM sends a copy of the SF50 to NGB/A1MM to close out file.

4.5.3. When another DoD component or Federal agency adopts a suggestion from an Air National Guard participant, the benefiting DoD component or other Federal agency funds the award. Payment from the AF will take eight to twelve weeks from time of approval.

4.5.4. If it primarily benefits a particular ANG unit or the NGB/ANG, pay the award from funds available to that unit

4.6. Special Recognition Awards. Plaques, trophies, and similar items valued no higher than \$150 may be given in addition to a monetary or non-monetary Suggestion award.

Chapter 5

ADOPTED AND PRESCRIBED FORMS

5.1. Adopted Forms.

AF Form 847, *Recommendation for Change of Publication*

AF Form 1000, *Idea Application*

AF Form 1000-1, *Idea Evaluation and Transmittal*

AF Form 1067, *Modification Proposal*

AF Technical Order Form 22, *Technical Manual (TM) Change Recommendations and Reply*

SF 50, *Notification of Personnel Action*; SF 1034, *Public Voucher for Purchases and Services Other Than Personal*.

5.2. Prescribed Forms. Not applicable.

HARRY M. WYATT III, Lieutenant General, USAF
Director, Air National Guard

Attachment 1**GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION**

References

DoD Instruction 1400.25-M, *DoD Civilian Personnel Manual*, December 1996

Abbreviations and Acronyms

ANG—Air National Guard

AGR—Active Guard/Reserve

DoD—Department of Defense

HRO—Human Resources Office

JRD—Job Responsibility Determination

OPR—Office of Primary Responsibility

SPM—Suggestion Program Manager

Terms

After—the-Fact Suggestion--Suggestion presented formally or informally to management prior to submission of AF Form 1000.

Approval—A submission that has been evaluated and approved for implementation.

Approval/Disapproval Authority—Any evaluator who has the ability to implement a suggestion.

Award—Appropriate recognition for an approved and implemented suggestion.

Confirmatory Suggestion—Any suggestion resulting from an approved separate improvement process (e.g., AFTO Form 22), where ownership is established and tangible/intangible benefits are documented on the separate improvement process form. Approved separate improvement process form will be attached to AF Form 1000; no evaluation required.

Co—Suggester--A member of a group or team who proposes a new or improved way of doing business.

Duplicate Suggestion—A suggestion that duplicates another suggested solution for which someone holds ownership rights.

Evaluation—A functional OPR's analysis of a contribution documented on an AF Form 1000-1.

Evaluator—An individual assigned by the functional OPR to analyze the contribution.

Extension—Written request to referring activity and originating suggestion office asking for additional time to evaluate or implement.

Group/Team Suggestion—A suggestion that has two or more suggester's and is the result of their combined efforts.

Implementation—A contribution put into use by the OPR.

Initial Presentation—Presentation of a suggestion which starts the 30 day clock for confirmatory suggestions.

Intangible Benefits—Benefits which cannot be computed in specific monetary terms.

Ownership Period—Time period beginning when suggestion was submitted through one year after final approval/disapproval action.

Reporting Official/Supervisor—Normally, supervisor of suggester who determines job responsibility; may also act as first-level evaluator.

Responsible Official—An individual at least one supervisory level above the evaluator who, by his or her signature on the AF Form 1000-1, ensures that the evaluation is valid, meets requirements of this directive, and is in the best interest of the Air National Guard.

Separate Improvement Process Documents—Forms used by other Air Force separate improvement programs (including, but not limited to, Technical Manual (TM) Change Recommendation and Reply (AFTO Form 22); that may be eligible for submission through the ANG Suggestion Program for evaluation and recognition.

Suggester—An individual who proposes a new or improved way of doing business.

Tangible Savings—Savings to the Government that can be measured in dollars.

Attachment 2

SAMPLE AF FORM 100

IDEA APPLICATION			
<small>(See instructions for completing AF Form 1000 and IDEA ineligibility criteria on AF Form 1000A)</small>			
PRIVACY ACT STATEMENT			
<small>AUTHORITY: 5 U.S.C. 501 and 10 U.S.C. 1124; E.O. 9397. PURPOSE: To document ideas that may contribute improvements to Government operations. ROUTINE USES: In the event the idea is adopted, the personal information provided by the submitter is used to process recognition (cash or honorary). SSN is used for positive identification. DISCLOSURE IS VOLUNTARY: Failure of the individual to provide a SSN and address may result in lack of appropriate recognition for an adopted idea since the SSN is used to positively identify the submitter, and the mailing address may be used to forward awards.</small>			
<input checked="" type="checkbox"/> IDEA	SCIENTIFIC ACHIEVEMENT	INVENTIONS	PATENT IDEAS
<small>NOTE: Update or Notify IDEA Analyst of Address Changes.</small>			
<small>SUBJECT OF IDEA: Provide suggestion (be brief, and identify any equipment when appropriate).</small>		<small>DATE RECEIVED (YYYYMMDD)</small> leave blank	<small>IDEA NO (To Be filled in by IDEA Analyst)</small> to be completed by HRO SPM
<small>WING MANPOWER/QUALITY (Include office symbol, location, DSN, FAX number and E-Mail address. To be filled in by IDEA analyst.)</small>		<small>SEPARATE DOCUMENT CONTROL NO. (If any)</small> to be completed by Base SPM	
1A. SUBMITTER PERSONAL INFORMATION (Primary Contact)			
<small>NAME OF SUBMITTER (Enter Last, First, MI, Grade/Rank)</small> If more than 1, primary contact is SME		<small>MIL CIV</small>	<small>STATUS (Active or Retired)</small>
<small>SSN</small>	<small>LOCAL NATIONAL'S IDENTIFICATION</small> leave blank	<small>E-MAIL/INTERNET ADDRESS</small>	
<small>ORGANIZATIONAL ADDRESS (Including functional symbol)</small>		<small>OFFICE PHONE</small>	
<small>-If this is a group suggestion, each co-suggestor must complete a section under 1B. -The award will be divided equally among all suggesters. -Please complete all blocks.</small>		<small>HOME OR MAILING ADDRESS (Include ZIP code)</small>	
1B. CO-SUBMITTERS PERSONAL INFORMATION			
<small>NAME OF SUBMITTER (Enter Last, First, MI, Grade/Rank)</small> If no co-submitter, leave blank		<small>MIL CIV</small>	<small>STATUS (Active or Retired)</small>
<small>SSN</small>	<small>LOCAL NATIONAL'S IDENTIFICATION</small> leave blank	<small>E-MAIL/INTERNET ADDRESS</small>	
<small>ORGANIZATIONAL ADDRESS (Including functional symbol)</small>		<small>OFFICE PHONE</small>	
		<small>HOME OR MAILING ADDRESS (Include ZIP code)</small>	
<small>NAME OF SUBMITTER (Enter Last, First, MI, Grade/Rank)</small>		<small>MIL CIV</small>	<small>STATUS (Active or Retired)</small>
<small>SSN</small>	<small>LOCAL NATIONAL'S IDENTIFICATION</small>	<small>E-MAIL/INTERNET ADDRESS</small>	
<small>ORGANIZATIONAL ADDRESS (Including functional symbol)</small>		<small>OFFICE PHONE</small>	
		<small>HOME OR MAILING ADDRESS (Include ZIP code)</small>	
<small>I HEREBY AGREE THAT UPON ACCEPTANCE OF CASH OR HONORARY AWARD, THE USE OF THIS IDEA BY THE UNITED STATES SHALL NOT FORM A BASIS OF A FURTHER CLAIM OF ANY NATURE UPON THE UNITED STATES BY ME, MY HEIRS, OR ASSIGNS. I UNDERSTAND THAT THIS IDEA MAY BE GRANTED AN AWARD ONLY IF APPROVED BY THE GOVERNMENT.</small>			
<small>I DECLINE CASH AWARD.</small>		<small>DATE (YYYYMMDD)</small>	<small>SIGNATURE OF SUBMITTERS</small>
<small>YES</small>	<small>NO</small>		
<small>YES</small>	<small>NO</small>		
<small>YES</small>	<small>NO</small>		

Attachment 3

SAMPLE AF FORM 1000-1

IDEA TITLE (i.e. F-16 Small Engine Repair)	IDEA NO. NGB NE 2009-
4. SAVINGS/BENEFITS: <i>(Complete if blocks 3A and 3D are marked. Provide expected benefits for your evaluation level only.)</i>	
<input checked="" type="checkbox"/> A. TANGIBLE SAVINGS: <i>(Define and give source of estimated first year savings. Specify personnel and material savings as described in AFI 38-401.)</i>	
SAVINGS COMPUTATION Cost of Old Method: \$ _____ Less Cost of New Method: _____ Less Cost of Conversion: _____ Total: \$ _____ Total Estimated First Year Savings: \$ _____	
COST OF OLD METHOD <i>(Provide rationale for computations. Use continuation sheet, if needed.)</i> Labor (Man Hours): Cost per Man-Hour: Total Labor Costs = Material (Number of Items): Cost of Each Item: Total Material Costs = Total Labor + Total Material = \$\$\$ (Remember to show rationale and validation)	
COST OF NEW METHOD <i>(Provide rationale for computations. Use continuation sheet, if needed.)</i> Labor (Man Hours): Cost per Man-Hour: Total Labor Costs = Material (Number of Items): Cost of Each Item: Total Material Costs = Total Labor + Total Material = \$\$\$ (Remember to show rationale and validation)	
COST OF CONVERSION: <i>(Provide rationale for computations. Use continuation sheet, if needed.)</i> Total Labor Cost: \$ Total Material/Equipment Cost: \$ Total Labor Costs + Total Material Costs: \$\$\$ Total First Year Net Dollar Savings: \$\$\$ (Labor and Material Less Cost of Conversion) This will save the ANG and the AF: \$\$\$	
<input type="checkbox"/> B. INTANGIBLE BENEFITS: <i>(Use when tangible savings cannot be computed or in addition to tangible savings when warranted.)</i>	

IDEA EVALUATION AND TRANSMITTAL <small>(Type submission. Follow instructions in AF 38-401.)</small>			
IDEA TITLE (i.e. F-16 Small Engine Repair)		IDEA NO. NGB NE 2009-	
<small>TO: (Address to next level evaluator/Wing Manpower/Quality Office, include E-Mail/Internet Address.)</small> TO Evaluator Name DSN evaluator@mail.af.mil	<small>FROM: (Evaluator's address, include E-Mail/Internet address)</small> FROM Evaluator Name DSN evaluator@mail.af.mil	<small>INFO COPY TO: (Originating Base and Other Applicable Parties)</small>	
1. IDEA HAS IMPACT ON/INTERFACES WITH ANOTHER COST SAVINGS PROGRAM OR SEPARATE ACTION? (If "Yes" name program/procedure. Give control/report number of separate action and furnish copy of document.)		<input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
2. EVALUATION OF IDEA. (If approved, describe the old method if different from that described on AF Form 1000 as well as the new method. If applicable, describe changes required and disposition of resources saved. Use continuation sheet, if needed.)			
<p>This suggester proposes . . .</p> <p>This suggestion will increase safety and save \$ ____ dollars. I feel this suggestion should be approved because . . .</p> <p>I commend the Suggester for taking the time and initiative to put their idea down on a Suggestion Form in order to . . .</p> <p>This suggestion benefits both the ANG and AF.</p>			
3. ACTION TAKEN OR RECOMMENDED.			
<input type="checkbox"/> A. APPROVED.	RECOMMEND WIDER USE.	<input type="checkbox"/> YES (List other potential users on continuation page.) <input type="checkbox"/> NO	<input type="checkbox"/> MANDATORY (Explain method of adoption in item 3.) <input type="checkbox"/> OPTIONAL
<input type="checkbox"/> B. IMPLEMENTATION DATE(S) IS/ARE:		ACTUAL (YYYYMMDD)	PROJECTED (YYYYMMDD)
<input type="checkbox"/> C. AUTHORIZED DELAY. (Provide reasons for delay in item 2.)		TARGET DATE:	
<input type="checkbox"/> D. RECOMMEND ADOPTION, BUT APPROVAL NOT WITHIN AUTHORITY OF THIS OFFICE. (Show reasons in Item 2 and complete Block 4a or 4b.)			
<input type="checkbox"/> E. DISAPPROVED. (Explain reasons in item 2.)	<input type="checkbox"/> ALREADY IN USE OR UNDER CONSIDERATION (Disapproval Authority signature not required)	<input type="checkbox"/> OTHER (Show others in item 2.)	
<input type="checkbox"/> F. NOT RECOMMENDED FOR ADOPTION, BUT DISAPPROVAL NOT WITHIN AUTHORITY OF THIS OFFICE. (Show reasons in item 2.)			
<small>EVALUATOR (Type Name, Title, Grade/Rank Organization, DSN, and e-Mail/Internet Address)</small> Evaluator Name DSN evaluator@mail.af.mil		<small>RESPONSIBLE OFFICIAL (Type Name, Title, Grade/Rank, Organization at Branch/Section/or Flight level or above. Must be at least one level above evaluator)</small>	
SIGNATURE OF EVALUATOR	DATE	SIGNATURE OF RESPONSIBLE OFFICIAL	DATE
<small>DISAPPROVAL AUTHORITY (Type Name, Title, Grade/Rank Organization, DSN, and e-Mail/Internet Address)</small>		SIGNATURE OF DISAPPROVAL AUTHORITY	DATE

Attachment 5**BASE & HRO'S EVALUATOR CHECKLIST**

To make it easier to check the evaluation form, double check to be sure you have answered all the following questions. If you need help, call DSN 266-4004.

- a. Is the evaluation addressed to the next organization needing to take the next action (next evaluation office) in the TO: this block should be addressed to the next level evaluator's office. It should contain the complete address of the evaluator.
- b. The FROM: block is the unit evaluator's office symbol and complete address.
- c. If you elected to adopt the suggestion, did you place an "X" in Item 3.A.? Did you check either Mandatory or Optional? Did you furnish the IMPLEMENTATION DATE?
- d. If you don't have the authority to approve the suggestion, did you mark Block 3D ? All evaluations going to ANG for evaluation must be marked. Did you address the form to Higher OPR; e.g., the Appropriate Maintenance ALC/Depot
- e. Did you explain in Item 2. the reasons for your decision? Be very, very specific; give as much information as you can. Don't use abbreviations without first spelling out what is meant.
- f. Is the Tangible Savings shown in 4.A.? Show the cost of savings, provide supporting documentation if possible.
- g. Did you include your printed name, rank, title, organization, and DSN in the Evaluator Block? DID YOU SIGN IT?
- h. Did the responsible official (your supervisor) sign in the Responsible Official Block? Is the printed name, title, grade/rank, and organization included?
- i. All evaluations must be typed.
- j. Do you have the Job Responsibility Determination Sheet?

When you have answered "Yes" to the above questions, send package