

5 June 2017

SPECIAL REQUEST/AUTHORIZATION			
<small>PRIVACY ACT STATEMENT THE AUTHORITY TO REQUEST THIS INFORMATION IS CONTAINED IN 5 USC 301. THE PRINCIPLE PURPOSE OF THE INFORMATION IS TO ENABLE YOU TO MAKE KNOWN YOUR DESIRE FOR ITEMS LISTED OR FOR SOME OTHER SPECIAL CONSIDERATION OR AUTHORIZATION. THE INFORMATION WILL BE USED TO ASSIST OFFICIALS AND EMPLOYEES OF THE DEPARTMENT OF THE NAVY IN DETERMINING YOUR ELIGIBILITY FOR AND APPROVING OR DISAPPROVING THE SPECIAL CONSIDERATION OR AUTHORIZATION BEING REQUESTED. COMPLETION OF THE FORM IS MANDATORY, FAILURE TO PROVIDE REQUIRED INFORMATION MAY RESULT IN DELAY IN RESPONSE TO OR DISAPPROVAL OF YOUR REQUEST.</small>			
1. NAME:		2. RATE:	
3. SHIP OR STATION:		4. DATE OF REQUEST: (YYYYMMDD)	
5. DEPARTMENT/DIVISION:		6. DUTY SECTION/GROUP:	
7. NATURE OF REQUEST: <input type="checkbox"/> LEAVE <input type="checkbox"/> SPECIAL LIBERTY <input type="checkbox"/> SPECIAL PAY <input type="checkbox"/> COMMUTED RATIONS <input type="checkbox"/> OTHER (BELOW)			
8. NO. OF DAYS REQUESTED:	FROM (DATE AND TIME):	TO (DATE AND TIME):	
9. DISTANCE (MILES):	MODE OF TRAVEL: <input type="checkbox"/> CAR <input type="checkbox"/> AIR <input type="checkbox"/> TRAIN <input type="checkbox"/> BUS		
10. LEAVE ADDRESS:			11. TELEPHONE NUMBER:
12. REASON FOR REQUEST: <small>R: Requested Navy Training Center Class XXXXX from DDMMYY to DDMMYY. My deployment date is DDMMYY. Deploying in reason by Chain of Command. Approval implies verification of deployment info.</small>			
13. SIGNATURE OF APPLICANT (Use CAC for digital signature)			
14. I am eligible and obligate myself to perform all duties of person making application.		SIGNATURE OF STANDBY:	DUTY STATION:
15. RECOMMENDED APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO	RANK/RATE/TITLE:	SIGNATURE:	DATE:
16. RECOMMENDED APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO	RANK/RATE/TITLE:	SIGNATURE:	DATE:
17. RECOMMENDED APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO	RANK/RATE/TITLE:	SIGNATURE:	DATE:
18. RECOMMENDED APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO	RANK/RATE/TITLE:	SIGNATURE:	DATE:
19. RECOMMENDED APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO	RANK/RATE/TITLE:	SIGNATURE:	DATE:
20. RECOMMENDED APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO	RANK/RATE/TITLE:	SIGNATURE:	DATE:
21. <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED		SIGNATURE	
22. REASON FOR DISAPPROVAL:			

Enclosure (1)

5 June 2017



University of Arizona Naval ROTC Light Duty Chit



Patient Information

Name (Last, First MI.):

Platoon / Squad:

Description of Injury / Illness:

Date and Time Injury/Illness occurred:

Healthcare Provider

Patient Diagnosis:

Treatment:

Minimum Recovery Time:

Should Patient be placed on restricted or limited duty status? Yes / no

Beginning Date:

Ending Date:

If yes, circle specific kinds of activities that patient should not participate in:

Running

Heavy Lifting

Push-ups

Pull-ups

Abdominal exercises

Swimming

Carrying Loads on the Back

Leg Exercises (squats, jumps, lunges)

Dates of Follow-Up Exams:

Notes:

Name of Health Care Provider:

Phone Number:

Signature:

Enclosure (2)

NROTCUAINST 1601.6

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I, _____ do certify that the information presented in this document is accurate and up to date. I
Name of Patient

also agree to keep my chain of command informed on any follow up appointments or changes on the status of
my condition.

Patient Signature: _____

Platoon Commander Signature: _____

Company Executive Officer Signature : _____

Enclosure (2)

NROTCUAINST 1601.6

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Special Request Chit Instructions

1. Attain NAVPERS 1336/3
2. BOX 1 = LAST NAME, FIRST NAME, MIDDLE INITIAL
3. BOX 2 = MIDN #/C or OC or MECEP
4. BOX 3 = UNIVERSITY OF ARIZONA
5. BOX 4 = CURRENT DATE (YYYYMMDD)
6. BOX 5 = COMPANY and PLATOON
7. BOX 6 = SQUAD
8. BOX 7 = SELECT APPROPRIATE BOX*
 - a. MIDN do NOT accrue LEAVE and must select SPECIAL LIBERTY if requesting to miss Battalion Event
 - b. Select OTHER if Special Request Chit refers to tattoos, academic requests, etc.
9. BOX 8 = # of Days Requested. The FROM and TO Box must include both Date (YYYYMMDD) **and** Time (0000)
 - a. If this does not apply, enter **N/A**
10. BOX 9 = Approximate distance in MILES that will be travelled during Special Liberty **and** select the appropriate Mode of Travel Box
 - a. If this does not apply, enter **N/A** and do not select Mode of Travel Box
11. BOX 10 = Complete address of the destination of travel
 - a. If this does not apply, enter **N/A**
12. BOX 11 = Best phone number to be contacted if necessary

Enclosure (3)

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13. BOX 12 = Complete with as much detail as possible in the manner shown below. List all Battalion events and classes that will be missed.
- a. "Respectfully Request (R/R) to _____ from YYYYMMDD to YYYYMMDD in order to (IOT) _____. The NROTC Battalion events that will be missed include _____ and the NROTC classes that will be missed are _____."
14. BOX 13 = Digital signature
- a. Must have Adobe Acrobat Reader DC downloaded on computer.
- b. A red arrow will appear in the top left corner allowing for digital signature.
- c. If you do NOT have a digital signature setup, select Configure New Digital ID then Create a new Digital ID. Follow the instructions.
- d. Once completed, select Box 13 again and sign with Digital ID that you just created
15. Email copy to next individual in the COC as stated in Paragraph 3.A.1.

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1 NAME LAST NAME, FIRST NAME, MIDDLE INITIAL		2 RATE MIDN #C	
3 SHIP OR STATION UNIVERSITY OF ARIZONA		4 DATE OF REQUEST (YYYYMMDD) 2017-11-10	
5 DEPARTMENT/DIVISION: ALPHA COMPANY / 1ST PLATOON		6 DUTY SECTION/GROUP: 1ST SQUAD	
7 NATURE OF REQUEST: <input type="checkbox"/> LEAVE <input checked="" type="checkbox"/> SPECIAL LIBERTY <input type="checkbox"/> SPECIAL PAY <input type="checkbox"/> COMMUTED RATIONS <input type="checkbox"/> OTHER (BELOW)			
8 NO. OF DAYS REQUESTED: 5	FROM (DATE AND TIME): 20171204 1600	TO (DATE AND TIME): 20171209 0800	
9 DISTANCE (MILES): 400	MODE OF TRAVEL <input checked="" type="checkbox"/> CAR <input type="checkbox"/> AIR <input type="checkbox"/> TRAIN <input type="checkbox"/> BUS		
10 LEAVE ADDRESS 1234 4TH AVENUE CITY, STATE 01234		11 TELEPHONE NUMBER 123-456-7890	
12 REASON FOR REQUEST R/R to _____ from YYYYMMDD to YYYYMMDD in order to (IOT) _____. The NROTC Battalion events that will be missed include _____ and the NROTC classes that will be missed are _____.			
13 SIGNATURE OF APPLICANT (Use CAC for digital signature) _____			

Enclosure (3)

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Light Duty Chit Instructions

1. Attain Light Duty Chit, Enclosure (2).
2. Complete all items under the section titled *Patient Information*.
 - a. Where it states *Platoon / Squad*, ensure that the Company is included. If Battalion, Company, or Platoon Staff, state current billet.
3. Print and bring the physical copy to a medical physician.
4. Have medical physician complete all items under the section titled *Healthcare Provider*.
 - a. Ensure that the medical physician completes all aspects of the Light Duty Chit.
5. Print and sign on the lines labeled *Patient*.
6. Submit physical copy to the next individual in the COC as stated in Paragraph 3.A.2.

Enclosure (4)

NROTCUAINST 1601.6

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Leave/Special Liberty Request Chits

1. OCs and MECEPs will submit their leave chits via their respective online systems. NSIPS for OCs and MOL for MECEPs. These leave chits will be submitted to their respective academic advisors.

2. Once completed, OCs and MECEPs will complete a Special Request Chit in accordance with Paragraph 3.A.1 and Enclosure (3) in order to (IOT) inform the Battalion Chain of Command (COC).

Enclosure (5)

NROTCUAINST 1601.6
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The University of Arizona NROTC Liberty Boundaries



DEPARTMENT OF THE NAVY
NAME OF ACTIVITY
ADDRESS
CITY STATE ZIP+4

SSIC
Code/Ser 001
Date

%

From: Activity head, name of activity, location when
needed

To: Title, name of activity (Code), location when needed

Via: (1) Title, name of activity (Code), location when needed
(2) Same as Via (1) above

%

Subj: NORMAL WORD ORDER WITH ALL LETTERS
CAPITALIZED AND NO PUNCTUATION

%

Ref: (a) Communication or document that bears
directly on the subject at hand

%

Encl: (1) Title of Material – enclosed with letter
(2) Title of Material (sep cover) – not enclosed with letter

%

1. This example shows the first page of a two-page standard letter.
Included are many of the elements that might appear on a standard letter.

%

2. Start the "From:" line on the second line below the date line. The
date may be typed or stamped.

%

3. Arrange paragraphs as shown in figure 7-8.

%

a. Do not start a paragraph at the bottom of the page unless at least
two lines of text will remain on that page and at least two lines of text
will carry over to the next page.

%

b. Do not number the first page, number only succeeding pages.

- Space
% - Hard Return

FIGURE 7-1. STANDARD LETTER – FIRST PAGE

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Subj: REPEAT THE SUBJECT EXACTLY AS IT IS WRITTEN ON
THE FIRST PAGE OF THE LETTER

%

c. The second and succeeding pages of a standard letter look like this:

%

(1) Start typing on the sixth line (1-inch top margin). Repeat the subject line.

%

(2) Continue the text on the second line below the subject line.

%

4. "Copy to" addressees appear on all copies. "Blind copy to" addressees, as well as the identity of the writer and typist, appear on internal copies only.

5. A standard letter uses no complimentary close.

%

%

%

NAME OF SIGNER

By direction

%

Copy to:

SNDL number and/or short title of information addressee

SNDL number and/or short title of second information addressee

· - Space
% - Hard Return

5 June 2017

Proper Email Etiquette

1. Email allows individuals and activities to exchange information via computer. You may use it for informal communications in place of a telephone call or text message.
2. The *Subject* line of the email shall be professional and contain a concise description of the contents of the email. If the email is urgent and must be read as soon as possible by the recipient, it shall be written like the following:

URGENT: Subject

3. All emails shall begin with the proper greeting of the day. The following are examples of how an email should be headed.

Good Morning Sir,

Good Afternoon Gentlemen,

Good Evening Ma'am,

Good Evening MIDN,

4. The content of the email shall remain professional and contain all necessary and pertinent information that is being passed to the recipient.
5. Upon the completion of writing the main content of the email, it is necessary to properly close the email.
 - a. When speaking to someone junior, close with "Respectfully," or "R/,"
 - b. When speaking to a superior, close with "Very Respectfully," or "V/r,"