

## **Information Required for Submission of a Request for Reconsideration of a Previously Approved Award to Upgrade to the Medal of Honor**

The MOH is awarded by the President of the United States in the name of Congress to a person who, while a member of the Army, distinguishes himself or herself conspicuously by gallantry and intrepidity at the risk of his or her life above and beyond the call of duty while engaged in an action against an enemy of the United States; while engaged in military operations involving conflict with an opposing foreign force; or while serving with friendly foreign forces engaged in an armed conflict against an opposing armed force in which the United States is not a belligerent party. The deed performed must have been one of personal bravery or self-sacrifice so conspicuous as to clearly distinguish the individual above his or her comrades and must have involved risk of life. **INCONTESTABLE PROOF OF THE PERFORMANCE OF THE SERVICE WILL BE EXACTED AND EACH RECOMMENDATION FOR THE AWARD OF THIS DECORATION WILL BE CONSIDERED ON THE STANDARD OF EXTRAORDINARY MERIT.**

### **1. Original Recommendation for Award With Chain of Command Endorsements and All Original Supporting Documentation**

a. Original documentation from the Vietnam era and prior may be available from: National Archives, ATTN: Textual Reference Branch, 8601 Adelphi Road, College Park, Maryland 20740-6001. We strongly encourage the requestor to consider hiring an independent researcher; a listing may be found at: <https://www.archives.gov/research/hire-help/locations.html?facility=college-park>. If the hired researcher cannot locate original award documents, please furnish a signed, detailed letter from that individual stating as such.

b. Documentation pertaining to more recent awards may be available from the command that initiated the recommendation, or from the command that ultimately acted on the recommendation. If a unit is no longer active, a Soldier or Veteran should contact the unit's next higher headquarters.

### **2. Letter of Justification/New DA Form 638 (Recommendation for Award)**

a. By regulation, the letter of justification may be a maximum of two single-spaced, typewritten pages.

b. The letter of justification must specifically describe what new information is being presented that was not previously considered at the time of the original recommendation and how this new information justifies a request for reconsideration or upgrade.

c. A new DA Form 638 for the Medal of Honor must be constructed as illustrated on the attached sample DA Form 638. It must be signed by a qualified living recommender; please see AR 600-8-22 (Military Awards), Paragraph 3-5 (Who May Recommend) (copy enclosed) for more guidance.

### 3. New proposed Narrative and Citation

- a. The Narrative describes the events in full detail that are supported in the supporting documents.
- b. The Citation is an abbreviated version of the Narrative no longer than 3/4th of a single typed page that will be presented to the public if the award is approved.

### 4. Eyewitness Statements

- a. Statements will be in the form of certificates, notarized affidavits, or sworn statements.
- b. At least two statements must be provided, giving clear and incontestable details of the events directly witnessed. Statements with events not directly witnessed or containing contradictory information may invalidate the eyewitness statement.

### 5. New, Substantive, and Material Information

- a. The new information being provided must reflect a substantive change in the scope and magnitude of a Soldier's actions, service, or achievements. Providing new information regarding minor details does not justify a request for reconsideration. Such information must be presented in the aforementioned letter of justification, award narrative and citation.
- b. To determine if the additional information submitted is new and fulfills regulatory requirements, the Awards and Decorations Branch compares the new documents to the original recommendation and, when possible, official supporting documentation, such as After Action Reports, Officer/Noncommissioned Officer Evaluation Reports, and other similar documents.
- c. Requests for reconsideration of heroic or valorous awards must be supported and corroborated by official documentation, such as After Action Reports, S2/S3 Journals, official histories of the event, notarized eyewitness statements, and similar documents.

### 6. Official Records

- a. Official records, extracts, sketches, maps, diagrams, and photographs that support and amplify the award must be provided.
- b. All maps and photographs and story boards must be presented in full color (if applicable); **ALL CLASSIFIED DOCUMENTS MUST BE CLEARLY MARKED BY ITS PROPER CLASSIFICATION IN RED.**
- c. All MOH recommendations for conflicts after the Vietnam era must contain an Army Regulation 15-6 investigation report.

## **7. New Chain of Command Endorsements**

a. The letter of justification, new, substantive, and material information, and any supporting documentation must be reviewed and endorsed by the Soldier's (or Veteran's) former wartime chain of command (at the time of action) in the appropriate intermediate authority blocks of the new DA Form 638.

## **8. Referral by a Member of Congress.**

a. A request for reconsideration or appeal of a disapproved or downgraded award, or a request for an upgrade of a previously approved recommendation must be placed in official channels within one year from the date of the awarding authority's decision. If one year has passed without such action, it must be referred to the Awards and Decorations Branch by an active Member of the U.S. Senate or House in accordance with Title 10, United States Code, Section 1130. One time reconsideration by the award approval authority shall be conclusive.

b. The referring Member of Congress does not have to be the Soldier's (or Veteran's) Senator or Representative.

**Specific questions concerning the requirements for MOH reconsideration may be directed to the U.S. Army Human Resources Command, Awards and Decorations Branch at: 502-613-9126, or [usarmy.knox.hrc.mbx.tagd-awards@mail.mil](mailto:usarmy.knox.hrc.mbx.tagd-awards@mail.mil). Written inquiries may be submitted to: U.S. Army Human Resources Command, ATTN: AHRC-PDP-A, 1600 Spearhead Division Avenue, Department 480, Fort Knox, Kentucky 40122-5408.**

### **3–5. Who may recommend**

*a.* The Army does not allow self-recognition (including spouses or other Family members), therefore, a Soldier may not recommend himself or herself for award of a decoration.

*b.* The recommending official must have first-hand personal knowledge of the event, or have been senior in grade at the time of the action(s) or service, to the individual being recommended for an award. Additionally, the recommending official must have knowledge of all the action(s) or service cited. That is, the recommending official must have either observed the actions or been provided information by an individual who observed the actions.

*c.* Recommending officials who did not personally witness the action must have been associated, by virtue of their position in the command, with the incident and/or the individual being recommended for the award. If the recommending official is not the commanding officer, the commander, if available, must endorse the recommendation. If it is no longer possible to route the recommendation through the commander (for example, the commander is deceased), a signed statement to the effect must be included. In this case, another officer who has knowledge of the action(s), and who was senior in the chain of command of the individual being recommended during the period for which recognition is desired, may endorse the recommendation.

*d.* Recommendations for the award of Army decorations to members of another Service branch will be submitted by Army personnel only.

### **3–6. Peacetime award approval authority**

*a.* Awards for peacetime service are made by the President, the SECDEF, and the SECARMY. When peacetime criteria apply, authority to award decorations is automatically delegated as shown in table 3–3.

*b.* Approval authorities must be in command or serving as head of a principal HQDA agency. The following also applies:

(1) Authority is extended to include those individuals occupying vacant command positions of approval authorities listed in table 3–3, regardless of grade. For example, a LTC/O–5 assigned on orders as a brigade commander (an authorized COL/O–6 position) is authorized to act on recommendations for award of the ARCOM. This authority may not be delegated to subordinate officials (that is, executive officer, chief of staff, deputy commander, and so forth).

(2) In instances where the incumbent commander is not available to act on recommendations (for example, hospitalization, extended TDY, or leave) the acting commander, regardless of rank, may take final action provided their assumption of command has been officially documented. In such cases, the acting commander will sign documents using the title "Acting Commander." A copy of the assumption of command orders will be filed with the DA Form 638.

(3) Rear detachment commanders are not authorized awards approval authority if the command is deployed forward. In this situation award recommendations will be forwarded to the next higher peacetime command awards approval authority.

*c.* Commanders can only approve awards for Servicemembers that are assigned or attached to their organizations by appropriate orders or other documentation. When Servicemembers perform duties with a command to which they are not assigned or attached, award recommendations must be submitted to their parent unit/chain of command for approval.

*d.* All CGs may delegate peacetime awards approval authority, in writing, to their DCGs commensurate with the DCG's rank. DCGs are further defined as an Army officer in the grade of BG/O–7 (including COL/O–6 promotable (P) in a general officer billet) and above.

*e.* The delegation of military awards approval authority to certain senior civilian leaders is governed by DA Memo 600–8–22 from the AASA.

*f.* Commanders having authority to approve an award may delegate disapproval authority (to include downgrade) to their immediate subordinate commanders, provided those subordinate commanders have authority to approve the next lower award. This delegation must be in writing and will be accomplished with each change of command. Commanders (ACOMs, ASCCs, DRUs) reporting directly to HRC for awards approval purposes, and officials reporting directly to a principal HQDA agency are delegated disapproval authority for current recommendations for award of the DFC, SM, and AM. Such commanders and HQDA officials may also disapprove service and other achievement award recommendations, provided they have authority to approve the next lower award. This disapproval authority includes awards for non-Army personnel.

*g.* The CSA (delegated to the Vice CSA) has the authority to approve all recommendations of the DSM.

*h.* Army general officers with LM approval authority are delegated downgrade authority for DSM recommendations for COL/O–6 and below. Additionally, ACOM commanders have authority to disapprove or downgrade all recommendations of the DSM (to include general officers). This downgrade authority will not be further delegated.

*i.* An individual who is eligible for a DOD Joint award will not be recommended for an award through their parent Service unless an appropriate DOD Joint award does not exist. Unless otherwise stated, only Servicemembers assigned to a joint duty activity or joint task force headquarters, or performing duties related to joint matters in accordance with 10

**RECOMMENDATION FOR AWARD**

For use of this form, see AR 600-8-22; the proponent agency is DCS, G-1.

For valor/heroism/wartime and all awards higher than MSM, refer to special instructions in Chapter 3, AR 600-8-22.

**PRIVACY ACT STATEMENT**

**AUTHORITY:** 10 U.S.C. Chapters 57 and 357, Decorations and Awards; 10 U.S.C. 3013, Secretary of the Army; Army Regulation 600-8-22, Military Awards; and E.O. 9397 (SSN), as amended.

**PURPOSE(S):** To consider individual nominations for awards and/or decorations; record final action; maintain individual award case files.

**ROUTINE USES:** In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act of 1974, as amended, these records contained therein may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 552a(b)(3) as follows: Information may be disclosed to public and private organizations including news media, which grant or publicize awards or honors.

**DISCLOSURE:** Disclosure of personally identifiable information is voluntary. However, failure to provide identifying information may delay processing of this application.

<b>1 TO</b> USAHRC, ATTN: AHRC-PDP-A, 1600 Spearhead Division Ave., Dept. 480, Ft. Knox, KY 40122-5408	<b>2 FROM</b> Should contain the name and mailing address of the last endorsing intermediate authority or that of the recommender if all intermediate authorities are deceased	<b>3 DATE (YYYYMMDD)</b> Date the recommender signs the recommendation
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**PART I- SOLDIER DATA**

<b>4 NAME (Last, First, Middle Initial)</b> Service Member or Veteran's full name	<b>5 RANK</b> At the time of the proposed award	<b>6.SSN</b> Recipient's SSN or service number, if applicable
<b>7. ORGANIZATION</b> Recipients unit of assignment during the period for which he/she is being recommended	<b>8 PREVIOUS AWARDS</b> List all previous individual decorations; service medal, campaign medals badges, and unit awards should not be listed	
<b>9 BRANCH OF SERVICE</b>	<b>10. RECOMMENDED AWARD</b> Specify recommended award	<b>11. PERIOD OF AWARD</b> a FROM _____ b TO _____

<b>12 REASON FOR AWARD</b>				
<b>12a. INDICATE REASON</b> SVC, ACH, Heroism, Valor, ETS, PCS, or RET	<b>12b. INTERIM AWARD</b> IF YES, STATE AWARD GIVEN	YES <input type="checkbox"/> NO <input type="checkbox"/>	<b>12c. POSTHUMOUS</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	<b>13. PROPOSED PRESENTATION DATE (YYYYMMDD)</b> Regulation suggests submission of a recommendation 90 days prior

**PART II - RECOMMENDER DATA**

<b>14. NAME (Last, First, Middle Initial)</b> Recommender must have personal, firsthand knowledge	<b>15. ADDRESS</b> Recommender's mailing or official address
<b>16. TITLE/POSITION</b> At the time of the proposed award	<b>17. RANK</b> At the time of the award
<b>18. RELATIONSHIP TO AWARDEE</b>	<b>19. SIGNATURE</b> Must be signed by the recommender

**PART III- JUSTIFICATION AND CITATION DATA (Use specific bullet examples of meritorious acts or service)**

**20. ACHIEVEMENTS**

**ACHIEVEMENT #1**  
 Recommendations for the Meritorious Service Medal and below will utilize the achievement blocks to list the justification for the award.

Recommendations for the Bronze Star Medal and above will utilize a separate award narrative. Narratives for award of the Bronze Star Medal through Silver Star are limited to one double-spaced typewritten page in a standard 12 point font. There are no regulatory limits to the length of the narrative for recommendations of the Distinguished Service Medal and higher.

**ACHIEVEMENT #2**

**ACHIEVEMENT #3**

**ACHIEVEMENT #4**

**21. PROPOSED CITATION**

Recommendations for the Meritorious Service Medal and below will utilize this block for the proposed citation. Proposed citation for the Meritorious Service Medal and below are limited to six lines.

Recommendations for the Bronze Star Medal and above must be submitted with a separate proposed citation. Proposed citation for award of the Bronze Star Medal through Silver Star are limited to nine lines. Proposed citations for award of the Distinguished Service Medal and higher may be up to 19 lines.

<b>NAME (Last, First, Middle Initial)</b> <i>Service Member or Veteran's full name</i>	<b>SSN</b> <i>Service Member of Veteran's SSN or service number, if applicable.</i>
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**PART IV - RECOMMENDATIONS/APPROVAL/DISAPPROVAL**

<b>22. I certify that this individual is eligible for an award in accordance with AR 600-8-22; and that the information contained in Part I is correct.</b>		<b>22a. SIGNATURE</b> <i>Signed by the S-1 or the recommender if discharged</i>	<b>22b. DATE (YYYYMMDD)</b> <i>Dated by signer of 22a.</i>
<b>23. INTERMEDIATE AUTHORITY</b>	<b>a. TO</b> <i>Commander, X Battalion</i>	<b>b. FROM</b> <i>Commander, Company X, X Battalion</i>	<b>c. DATE (YYYYMMDD)</b> <i>Dated by intermediate</i>
<i>If living, intermediate authority must check the box of their recommendation. If deceased do not check a box.</i>			
<b>d. RECOMMEND:</b> <input type="checkbox"/> <b>APPROVAL</b> <input type="checkbox"/> <b>DISAPPROVAL</b> <input type="checkbox"/> <b>UPGRADE TO:</b> <input type="checkbox"/> <b>DOWNGRADE TO:</b>			
<b>e. NAME (Last, First, Middle Initial)</b> <i>Former commander's full name</i>		<b>f. RANK</b> <i>At the time indicated in Block 11</i>	
<b>g. TITLE/POSITION</b> <i>Former Company Commander</i>		<b>h. SIGNATURE</b> <i>If living, intermediate authority must sign.</i>	
<b>i. COMMENTS</b> <p align="center"><i>Block 26 is to be left entirely blank, this block is used by USAHRC.</i></p>			

<b>24. INTERMEDIATE AUTHORITY</b>	<b>a. TO</b> <i>Commander, X Regiment / Brigade</i>	<b>b. FROM</b> <i>Commander, X Battalion</i>	<b>c. DATE (YYYYMMDD)</b> <i>Dated by intermediate</i>
<i>If living, intermediate authority must check the box of their recommendation. If deceased do not check a box.</i>			
<b>d. RECOMMEND:</b> <input type="checkbox"/> <b>APPROVAL</b> <input type="checkbox"/> <b>DISAPPROVAL</b> <input type="checkbox"/> <b>UPGRADE TO:</b> <input type="checkbox"/> <b>DOWNGRADE TO:</b>			
<b>e. NAME (Last, First, Middle Initial)</b> <i>Former commander's full name</i>		<b>f. RANK</b> <i>At the time indicated in Block 11</i>	
<b>g. TITLE/POSITION</b> <i>Former Battalion Commander</i>		<b>h. SIGNATURE</b> <i>If living, intermediate authority must sign.</i>	
<b>i. COMMENTS</b> <p align="center"><i>Pertinent comments from the commander or date of death if deceased.</i></p>			

<b>25. INTERMEDIATE AUTHORITY</b>	<b>a. TO</b> <i>Commander, X Brigade / Division / Corps /etc.</i>	<b>b. FROM</b> <i>Commander X Regiment / Brigade</i>	<b>c. DATE (YYYYMMDD)</b> <i>Dated by intermediate</i>
<i>If living, intermediate authority must check the box of their recommendation. If deceased do not check a box.</i>			
<b>d. RECOMMEND:</b> <input type="checkbox"/> <b>APPROVAL</b> <input type="checkbox"/> <b>DISAPPROVAL</b> <input type="checkbox"/> <b>UPGRADE TO:</b> <input type="checkbox"/> <b>DOWNGRADE TO:</b>			
<b>e. NAME (Last, First, Middle Initial)</b> <i>Former commander's full name</i>		<b>f. RANK</b> <i>At the time indicated in Block 11</i>	
<b>g. TITLE/POSITION</b> <i>Former Regiment / Brigade Commander</i>		<b>h. SIGNATURE</b> <i>If living, intermediate authority must sign.</i>	
<b>i. COMMENTS</b> <p align="center"><i>Block 26 is to be left entirely blank, this block is used by USAHRC.</i></p>			

<b>26. APPROVAL AUTHORITY</b>	<b>a. TO</b> <i>Leave Blank</i>	<b>b. FROM</b> <i>Leave Blank</i>	<b>c. DATE (YYYYMMDD)</b> <i>Dated by intermediate</i>
<b>d.</b> <input type="checkbox"/> <b>APPROVED</b> <input type="checkbox"/> <b>DISAPPROVED</b> <input type="checkbox"/> <b>RECOMMEND UPGRADE TO:</b> <input type="checkbox"/> <b>DOWNGRADE TO:</b>			
<b>e. NAME (Last, First, Middle Initial)</b> <i>Leave Blank</i>		<b>f. RANK</b> <i>Leave Blank</i>	
<b>g. TITLE/POSITION</b> <i>Leave Blank</i>		<b>h. SIGNATURE</b> <i>Leave Blank</i>	
<b>i. COMMENTS</b> <p align="center"><i>Block 26 is to be left entirely blank, this block is used by USAHRC.</i></p>			

**PART V - ORDERS DATA**

<b>27a. ORDERS ISSUING HQ</b> <i>Leave Blank</i>	<b>27b. PERMANENT ORDER NO.</b> <i>Leave Blank</i>	<b>31. DISTRIBUTION</b>
<b>28a. NAME OF ORDERS APPROVAL AUTHORITY</b> <i>Leave Blank</i>	<b>28b. RANK</b> <i>Leave Blank</i>	
<b>28c. TITLE/POSITION</b> <i>Leave Blank</i>	<b>29. APPROVED AWARD</b> <i>Leave Blank</i>	
<b>28d. SIGNATURE</b> <i>Leave Blank</i>	<b>30. DATE (YYYYMMDD)</b> <i>Leave Blank</i>	

NAME (Last, First, Middle Initial) Service Member or Veteran's full name		SSN Service Member or Veteran's SSN or service number, if applicable.	
<b>ADDENDUM - INTERMEDIATE AUTHORITY</b>			
<b>25-A1. INTERMEDIATE AUTHORITY</b>	a. TO Commander, X Division / Corps / etc.	b. FROM Commander, X Brigade / Division / Corps / etc.	c. DATE (YYYYMMDD) Dated by intermediate
If living, intermediate authority must check the box of their recommendation. If deceased do not check a box.			
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial) Former commander's full name		f. RANK At the time indicated in Block 11	
g. TITLE/POSITION Former X Commander		h. SIGNATURE If living, intermediate authority must sign.	
i. COMMENTS Pertinent comments from the commander or date of death if deceased			
<b>25-A2. INTERMEDIATE AUTHORITY</b>	a. TO Commander, X Corps / etc.	b. FROM Commander, X Division / Corps, etc.	c. DATE (YYYYMMDD) Dated by intermediate
If living, intermediate authority must check the box of their recommendation. If deceased, do not check a box.			
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial) Former commander's full name		f. RANK At the time indicated in Block 11	
g. TITLE/POSITION Former X Commander		h. SIGNATURE If living, intermediate authority must sign.	
i. COMMENTS Pertinent comments from the commander or date of death if deceased			
<b>25-A3. INTERMEDIATE AUTHORITY</b>	a. TO USAHRC, ATTN: AHRC-PDP-A or the next higher headquarters as necessary.	b. FROM Commander, X Corps / etc.	c. DATE (YYYYMMDD) Dated by intermediate
If living, intermediate authority must check the box of their recommendation. If deceased, do not check a box.			
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial) Former commander's full name		f. RANK At the time indicated in Block 11	
g. TITLE/POSITION Former X Commander		h. SIGNATURE If living, intermediate authority must sign.	
i. COMMENTS Pertinent comments from the commander or date of death if deceased			
<b>25-A4. INTERMEDIATE AUTHORITY</b>	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			
<b>25-A5. INTERMEDIATE AUTHORITY</b>	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			

# RECOMMENDATION FOR AWARD

For use of this form, see AR 600-8-22; the proponent agency is DCS, G-1.

For valor/heroism/wartime and all awards higher than MSM, refer to special instructions in Chapter 3, AR 600-8-22.

## PRIVACY ACT STATEMENT

**AUTHORITY:** 10 U.S.C. Chapters 57 and 357, Decorations and Awards; 10 U.S.C. 3013, Secretary of the Army; Army Regulation 600-8-22, Military Awards; and E.O. 9397 (SSN), as amended.

**PURPOSE(S):** To consider individual nominations for awards and/or decorations; record final action; maintain individual award case files.

**ROUTINE USES:** In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act of 1974, as amended, these records contained therein may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 552a(b)(3) as follows: Information may be disclosed to public and private organizations including news media, which grant or publicize awards or honors.

**DISCLOSURE:** Disclosure of personally identifiable information is voluntary. However, failure to provide identifying information may delay processing of this application.

1. TO	2. FROM	3. DATE (YYYYMMDD)
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## PART I - SOLDIER DATA

4. NAME (Last, First, Middle Initial)	5. RANK	6. SSN	
7. ORGANIZATION	8. PREVIOUS AWARDS		
9. BRANCH OF SERVICE	10. RECOMMENDED AWARD	11. PERIOD OF AWARD	
		a. FROM	b. TO
12. REASON FOR AWARD			
12a. INDICATE REASON	12b. INTERIM AWARD <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, STATE AWARD GIVEN	12c. POSTHUMOUS YES <input type="checkbox"/> NO <input type="checkbox"/>	13. PROPOSED PRESENTATION DATE (YYYYMMDD)

## PART II - RECOMMENDER DATA

14. NAME (Last, First, Middle Initial)	15. ADDRESS
16. TITLE/POSITION	17. RANK
18. RELATIONSHIP TO AWARDEE	19. SIGNATURE

## PART III - JUSTIFICATION AND CITATION DATA (Use specific bullet examples of meritorious acts or service)

20. ACHIEVEMENTS
ACHIEVEMENT #1
ACHIEVEMENT #2
ACHIEVEMENT #3
ACHIEVEMENT #4
21. PROPOSED CITATION

NAME (Last, First, Middle Initial)	SSN
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**PART IV - RECOMMENDATIONS/APPROVAL/DISAPPROVAL**

22. I certify that this individual is eligible for an award in accordance with AR 600-8-22; and that the information contained in Part I is correct.	22a. SIGNATURE	22b. DATE (YYYYMMDD)
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23. INTERMEDIATE AUTHORITY	a. TO	b. FROM	c. DATE (YYYYMMDD)
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d. RECOMMEND:     APPROVAL     DISAPPROVAL     UPGRADE TO:     DOWNGRADE TO:

e. NAME (Last, First, Middle Initial)	f. RANK
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g. TITLE/POSITION	h. SIGNATURE
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i. COMMENTS

24. INTERMEDIATE AUTHORITY	a. TO	b. FROM	c. DATE (YYYYMMDD)
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d. RECOMMEND:     APPROVAL     DISAPPROVAL     UPGRADE TO:     DOWNGRADE TO:

e. NAME (Last, First, Middle Initial)	f. RANK
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g. TITLE/POSITION	h. SIGNATURE
-------------------	--------------

i. COMMENTS

25. INTERMEDIATE AUTHORITY	a. TO	b. FROM	c. DATE (YYYYMMDD)
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d. RECOMMEND:     APPROVAL     DISAPPROVAL     UPGRADE TO:     DOWNGRADE TO:

e. NAME (Last, First, Middle Initial)	f. RANK
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g. TITLE/POSITION	h. SIGNATURE
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i. COMMENTS

26. APPROVAL AUTHORITY	a. TO	b. FROM	c. DATE (YYYYMMDD)
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d.     APPROVED     DISAPPROVED     RECOMMEND UPGRADE TO:     DOWNGRADE TO:

e. NAME (Last, First, Middle Initial)	f. RANK
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g. TITLE/POSITION	h. SIGNATURE
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i. COMMENTS

**PART V - ORDERS DATA**

27a. ORDERS ISSUING HQ	27b. PERMANENT ORDER NO.	31. DISTRIBUTION
28a. NAME OF ORDERS APPROVAL AUTHORITY	28b. RANK	
28c. TITLE/POSITION	29. APPROVED AWARD	
28d. SIGNATURE	30. DATE (YYYYMMDD)	

NAME (Last, First, Middle Initial)	SSN
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**ADDENDUM - INTERMEDIATE AUTHORITY**

<b>25-A1. INTERMEDIATE AUTHORITY</b>	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			

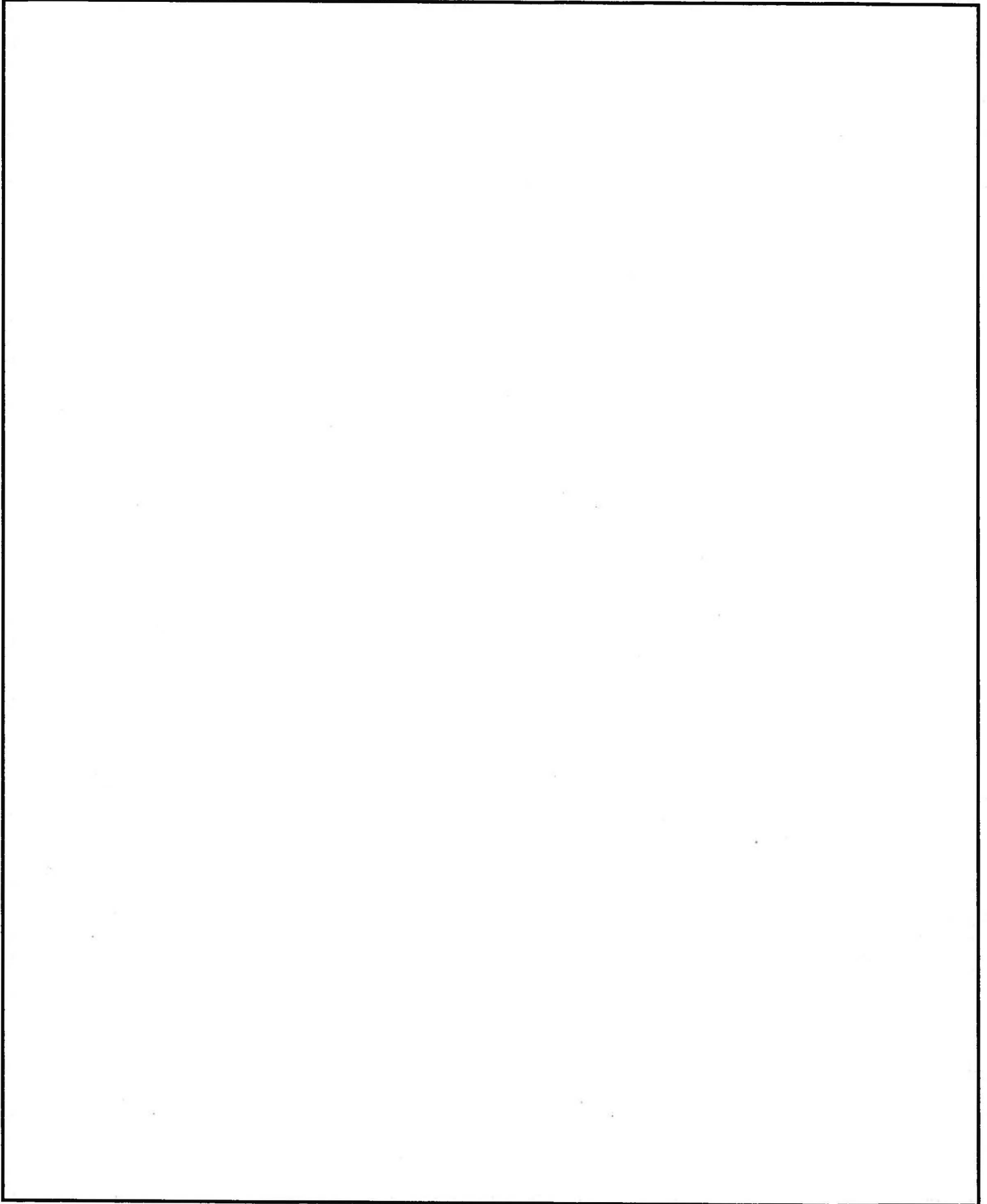
<b>25-A2. INTERMEDIATE AUTHORITY</b>	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			

<b>25-A3. INTERMEDIATE AUTHORITY</b>	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			

<b>25-A4. INTERMEDIATE AUTHORITY</b>	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			

<b>25-A5. INTERMEDIATE AUTHORITY</b>	a. TO	b. FROM	c. DATE (YYYYMMDD)
d. RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL <input type="checkbox"/> UPGRADE TO: <input type="checkbox"/> DOWNGRADE TO:			
e. NAME (Last, First, Middle Initial)		f. RANK	
g. TITLE/POSITION		h. SIGNATURE	
i. COMMENTS			

A large, empty rectangular box with a black border, occupying the majority of the page. This box is intended for the user to write a narrative. The interior of the box is completely blank and white.



# Eyewitness Statement (For Award Recommendation)

## EYEWITNESS STATEMENT(FOR AWARD RECOMMENDATION)

For use of this form, see AR 600-8-22; the proponent agency is DCS, G-1.

### PRIVACY ACT STATEMENT

**AUTHORITY:** Title 10, USC Section 301, Title 5, USC Section 2951

**PRINCIPAL PURPOSE:** To document first-hand eyewitness statements which accurately depict the actions of an individuals being recommended for an award or decoration, particularly for heroism or valor.

**ROUTINE USES:** The DOD Blanket Routine Uses that appear at the beginning of the Army's compilation of systems of records may apply to this system.

**DISCLOSURE:** Disclosure of personally identifiable information is voluntary; however, failure to provide identifying information may delay processing of this application.

1. LAST NAME, FIRST NAME, MIDDLE NAME

2. GRADE/STATUS

3. DATE (YYYY/MM/DD)

4. EMAIL ADDRESS

5. ORGANIZATION OR ADDRESS

6. WHO (PERSON MAKING STATEMENT; POSITION/DUTIES AT THE TIME OF INCIDENT; LOCATION RELATIVE TO INDIVIDUAL BEING RECOMMENDED)

7. WHERE (DESCRIBE WHERE THE EVENT TOOK PLACE TO INCLUDE TERRAIN (COVER AND CONCEALMENT), FIELD OF FIRE

8. WHEN (DATE OF ACTION, DURATION, AND CONDITIONS (DAYLIGHT OR DARK, WEATHER CONDITIONS AT THE TIME)

PAGE 1 OF \_\_\_\_\_ PAGES

ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATMENT OF \_\_\_\_\_ TAKEN AT \_\_\_\_\_ DATE \_\_\_\_\_"

THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT, AND PAGE NUMBER MUST BE INDICATED.

USE THIS PAGE IF NEEDED, IF THIS PAGE IS NOT NEEDED, PLEASE FINAL PAGE OF THIS FORM.

STATEMENT OF \_\_\_\_\_

TAKEN AT \_\_\_\_\_

DATE \_\_\_\_\_

9. WHAT (DESCRIBE MISSION/TASK, ENEMY SITUATION, IN DETAIL, DESCRIPTION OF HEROIC OR VALOROUS ACTIONS OF THE SOLDIER DURING THE EVENT)

INITIALS OF PERSON MAKING STATEMENT

PAGE \_\_\_\_\_ OF \_\_\_\_\_ PAGES

STATEMENT OF \_\_\_\_\_

TAKEN AT \_\_\_\_\_

DATE \_\_\_\_\_

9. CONTINUATION

I, \_\_\_\_\_, HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1, AND ENDS ON PAGE \_\_\_\_\_ I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THIS STATEMENT IS TRUE AND I HAVE READ AND UNDERSTAND THE FALSE OFFICIAL STATEMENT WARNING. I HAVE INITIALED CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT,

\_\_\_\_\_  
*(Signature of Person Making Statement)*

False official statement cautionary warning; under Article 17, Uniform Code of Military Justice (UCMJ, Art. 107). Any person subject to this chapter who, with intent to deceive, signs any false record or other official document, knowing it to be false, or makes any other false official statement knowing it to be false, shall be punished as a court-martia may direct.

Persons subject to the UCMJ who violate the above prohibition are also subject to punishment under UCMJ, Art. 92, Failure to obey an order or regulation, as well as possible adverse administrative action authorized by the United States Code or Federal prosecutions. Any DA Civilian employees who violates the above prohibitions are subject to disciplinary action or criminal prosecution authorized by the United States Code or Federal regulations.

INITIALS OF PERSON MAKING STATEMENT

PAGE \_\_\_\_\_ OF \_\_\_\_\_ PAGES