From: To: Subject:

Officer attestation form

Date: Attachments: Thursday, October 28, 2021 2:20:20 PM Vaccine Attestation Form- Officers.docx Vaccine Attestation Form- Officers.pdf

Per our conversation.

V/r, bb

From:

Sent: Thursday, October 28, 2021 10:16 AM

Subject: FW: Officer attestation form

Hey

Please see updated attestation form. It needs to be filled out early in the process. I'd recommend having this filled out when they are filling out the MEPS documents.

As of right now;

- The Dets want to see it
- The NAFs want to see it
- FC physical requests want to make sure the applicant is willing to get the immunization before scheduling

Chief just said we will not be doing pre-accessions religious accommodations for immunizations.

BL: By getting the attestation signed early in the process we can avoid wasting time and money on unwilling applicants.

Thank you!



OA Tools on RS Sharepoint (right click, copy hyperlink, paste in browser)

PS – If unable to encrypt PII (Personally Identifiable Information) please send through the SAFE sitehttps://safe.apps.mil/, if you need me to send you a dropoff request, just email me with "Request SAFE Drop off for LASTNAME" as the subject. Thank you!

From:
Sent: Thursday, October 28, 2021 10:08 AM
To:

Subject: FW: Officer attestation form

Hi Joe,

Attached is the new attestastion form that I edited and approved by Chief Anderson.

//signed//



From:
Sent: Tuesday, October 26, 2021 2:43 PM

To:

Subject: FW: Officer attestation form

Let's put this in PDF Form with signature blocks. Use this for OA and HP to assist on moving packages.



From:

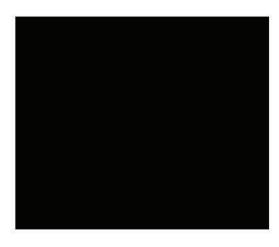
Sent: Monday, October 25, 2021 2:58 PM

To:

Subject: Officer attestation form

Chief,

Thanks for your assistance today, I believe it helped SG understand our process. I have attached and edited version of the attestation form for your review.





DEPARTMENT OF THE AIR FORCE AIR FORCE RESERVE COMMAND

ATTESTATION OF ADHERENCE TO MANDATORY VACCINATIONS/ IMMUNIZATIONS

All Service Members in the Department of Defense (DoD) are required to comply with applicable medical readiness requirements. One such requirement is that upon arrival at Initial Entry Training, all Service members must receive, if not already inoculated, immunizations required by the Joint Regulation for Immunizations and Chemoprophylaxis for the Prevention of Infectious Diseases and other applicable DoD guidance. These vaccinations include but are not limited to COVID-19, Meningococcal, Measles/Mumps/Rubella, tetanus-diphtheria-pertussis, and varicella.

I hereby attest that I have been advised of all mandatory immunizations I will receive as a condition of appointment into the Armed Forces.

Applicant Name (Last, First):
Applicant Signature:
Date signed (YYYYMMDD):
As the Service representative, I certify that I witnessed the above applicant's signature.
Recruiter Representative Name (Last, First):
Recruiter/Service Representative Signature:
Date signed (YYYYMMDD):