| DEPARTMENT OF HOMELAND SECURITYU.S. COAST GUARD**ADMINISTRATIVE REMARKS** |
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| **PRIVACY ACT STATEMENT**Pursuant to 5 U.S.C. §552a(e)(3), this Privacy Act Statement serves to inform you of why DHS is requesting the information on this form.**AUTHORITY**: 14 U.S.C. § 505**PURPOSE**: To document a USCG service member’s achievements, accomplishments, Uniform Code of Military Justice (UCMJ) infraction(s), or any other USCG military pay or personnel activity.**ROUTINE USES:** Authorized USCG officials will use this information to validate a USCG service member’s achievements, accomplishments, UCMJ infraction(s) or any other USCG military pay or personnel activity. Any external disclosures of information within this record will be made in accordance with DHS/USCG-014, Military Pay and Personnel, 76 Federal Register 66933 (October 28, 2011).**CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION:** Providing this information is voluntary. However, failure to provide this information may result in a delay in administrating this form. |
| Entry Type: Performance and Discipline (P&D-13) – Alcohol IncidentReference: Military Substance Abuse and Behavioral Addiction Program, COMDTINST 1000.10 (series)Responsible Level: UnitEntry: DDMMMYYYY: You received an alcohol incident on (enter date) when your abuse of alcohol was determined to be a significant and/or causative factor (describe what happened). explicity state that the CO/OIC has determined by a preponderance of the evidence that the member committed an alcohol incident and should set forth the relevant facts and evidence upon which that determination was made. Also state whether the consumption affected the member’s ability to perform assigned duties or brought discredit upon the Uniformed Services where an AI involves underage consumption, see Paragraph 3.D.3., of COMDTINST 1000.10 (series). You were counseled on Coast Guard policies concerning alcohol use and abuse as well as the serious nature of this incident. The unit Command Drug and Alcohol Representative (CDAR) will arrange an appointment with a provider who will determine the nature of your relationship with alcohol. It is highly recommended that you (or for those under 21) You shall abstain from the use of alcohol until your screening and assessment is completed.*Choose one of the following:*[ ]  This is considered your first documented alcohol incident. Any further incidents may result in you being processed for separation, in accordance with Military Substance Abuse and Behavioral Addiction Program, COMDTINST 1000.10 (series), and the Military Separations COMDTINST 1000.4. *or,**Continued on next page* |

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| Entry*: (Continued from previous page)*[ ]  This is considered your first documented alcohol incident, however, in accordance with COMDTINST 1000.10 (series). Chapter 3, and Military Separations COMDTINST 1000.4 Chapter 2, administrative discharge proceedings will be initiated for:(1) Any member who is convicted by domestic or civil authorities, convicted by court-martial, or on whom nonjudicial punishment is imposed for drunken or impaired operation of a vehicle, aircraft, or vessel,(2) Any member who refuses to take a blood alcohol test or breathalyzer by a recognized authority for suspicion of drunken or impaired operation of a vehicle, aircraft, or vessel, or (3) A situation where the member’s commanding officer has made a written finding setting forth the facts of the matter and that based on a preponderance of the evidence, the member was drunk or impaired while operating a vehicle, aircraft, or vessel in violation of Federal, state, or local law. A. B. SEA, CAPT, USCGCommanding OfficerDDMMMYYYY: I acknowledge the above entry. FIRST MI. LAST |
| 1. NAME OF PERMANENT UNIT      | 2. NAME OF UNIT PREPARING THIS FORM      |
| 3. NAME OF MEMBER (Last, First, Ml)      | 4. EMPLOYEE ID NUMBER       | 5. GRADE/RATE      |

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