|  |  |  |
| --- | --- | --- |
|  | Commanding Officer/ Commander United States Coast GuardYour Unit Here | Unit Street AddressMail Stop XXXXCity, State Zip CodeStaff Symbol: CG-XXXXPhone: (xxx) xxx-xxxxFax: (xxx) xxx-xxxxEmail: officialemail@uscg.mil |

 1420

 dd Mmm yyyy

**MEMORANDUM**

(Wet or Electronic Signature here)

From: First Name MI. Last Name, Rank Reply to Staff Symbol

 Staff Symbol Attn of: Name of Point of Contact

 Phone: (xxx) xxx-xxxx

To: CG PSC-RPM

Thru: First Name MI. Last Name, Rank or

Staff Symbol (Flag level)

Subj: FROCKING REQUEST FOR RANK FIRST NAME MI. LAST NAME, EMPLID, USCGR

Ref: (a) Officer Accessions, Evaluations, and Promotions, COMDTINST M1000.3 (series)

 (b) Reserve Policy Manual, COMDTINST M1001.28 (series)

 (c) ALCGPSC XX/XXX

1. I request authorization to frock rank First Name MI. Last Name, to the next higher paygrade of XXX, effective day Month Year in accordance with ref (a) and (b).
2. Rank First Name MI. Last Name has been selected for promotion as per ref (c). Member meets the criteria of ref (a) 3.A.13.a (1, 2, 3, or 4) brief explanation of how officer meets the criteria of reference (a).

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Disapprove

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