

SSIC
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DATE

From: Commanding Officer, Naval and Marine Corps Reserve Center,
Anytown

To: Naval Reserve Echelon IV Command

Subj: NRAC 12-MONTH WAIVER EXTENSION REQUEST ICO SN LAST NAME, FIRST
NAME, USNR, 123-45-6789

Ref: (a) COMNAVSERVTRACOM/COMNAVRESFORCOMINST 3500.1

1. JUSTIFICATION: Enlistment date, cancellation date(s), reason for cancellation(s), recommendations from command.
2. REQUESTED SCHOOL DATE: Class date or month. Expiration date will be assigned according to request.
3. POINT OF CONTACT: NRAC Coordinator, telephone and e-mail address.

CO's Signature or directional signature

Copy to:
COMNAVRESFORCOM (N7)
NRAC