

MEMORANDUM FOR (SUPERVISOR ORG/SYMBOL)

FROM: (MEMBER'S ORG/SYMBOL)

SUBJECT: Leave Carryover Statement of Understanding and Election

(Please initial)

1. \_\_\_\_ I (Typed, Rank, Name, and last 4 of SSN) have read the Air Force Reserve Command Leave Carryover Program Policy Guidance Phase II, understand the impact that it has on my tour/leave balance and have attached a copy of my leave and earnings statement (LES).
2. \_\_\_\_ I understand IAW 10 USC 701(k), the FY11 NDAA authorized Reserve Component members to carry leave forward from active duty tour to another tour.
3. \_\_\_\_ In conjunction with my next MPA/RPA/AGR/EAD tour duty starting \_\_\_\_\_ , I hereby request to carry forward \_\_\_\_\_ of my accrued leave as noted below.
4. \_\_\_\_ I understand that if my order includes an extension to accommodate approved leave carryover, I must use that leave plus any accrued leave within this order.
6. \_\_\_\_ I understand I will lose the balance that exceeds 60 days when crossing fiscal years, unless I am on a tour of duty that places me in a Special Leave Accrual policy.
7. \_\_\_\_ I understand leave is not a career continuation incentive through the accrual of large leave balances.
8. \_\_\_\_ The following leave was earned while in a combat zone and is tax deductible. Therefore, I am identifying the pertinent information so that taxes may be credited back to me.

\_\_\_\_\_ Days of leave earned on order# \_\_\_\_\_ were in a combat zone (if applicable)

---

Member's Full Signature and Date

1st Ind to (OFFICE SYMBOL FOR 1<sup>ST</sup> INDORSEMENT OFFICIAL), DD MMM YY, Leave Carryover Statement of Understanding and Election

MEMORANDUM FOR (OFFICE SYMBOL FOR 2D INDORSEMENT OFFICIAL)

I have reviewed the LES and applicable orders to verify leave balances as noted above. I have also counseled the member the maximum number of days allowed to carry forward at the end of each fiscal year is 60 days.

---

Supervisor Signature Block and Date  
(Supervisor at mbr's reporting unit)

Attachments:

Documents reflecting amount of days available to carry forward

2nd Ind to (OFFICE SYMBOL FOR 2d INDORSEMENT OFFICIAL) DD MMM YY, Leave Carryover Statement of Understanding and Election

MEMORANDUM FOR (MEMBER)

I approve/disapprove (circle one) the member's request to use leave carryover during the upcoming tour. I understand that leave days will be added to the order for which approved and these leave days will be charged to the order and the applicable appropriation. For MPA requirements, I will ensure the tour end date in the M4S message reflects the additional leave carryover days and that a remark is included in the M4S message to state the number of days of leave carryover approved for the tour.

\_\_\_\_\_RPA requirement

\_\_\_\_\_MPA requirement

\_\_\_\_\_Approved

\_\_\_\_\_Disapproved

\_\_\_\_\_  
Commander Signature Block and Date  
(CC at mbr's reporting unit)