

Start Here: Select **"for Myself"** if member is submitting the ERAB Application.

Select **"as an Authorized Representative"** (i.e. MPF or CSS **ONLY** IAW AFI 36-2406 10.4) if you're submitting the ERAB Application on behalf of the member.

[New Request](#)

Note: An incomplete application must be re-saved every 21 days, or submitted, or it will be cancelled.

(Start Here) I am submitting this application (select one) for Myself as an Authorized Representative

Member Information

| | |
|-------------------------|----------------------|
| Name | <input type="text"/> |
| Primary Phone* | <input type="text"/> |
| Primary Email Address* | <input type="text"/> |
| Alternate Email Address | <input type="text"/> |

Application Information

Application Date: (Not yet submitted) Status: New

Select the Type of Report being appealed from the drop-down menu and provide the related information.

| | | | | | | |
|-------|----------------------|---------------|----------------------|--------------------------|-------------------|----------------------|
| Type* | <input type="text"/> | Closeout Date | <input type="text"/> | <input type="checkbox"/> | Requested Action* | <input type="text"/> |
| Type | <input type="text"/> | Closeout Date | <input type="text"/> | <input type="checkbox"/> | Requested Action | <input type="text"/> |
| Type | <input type="text"/> | Closeout Date | <input type="text"/> | <input type="checkbox"/> | Requested Action | <input type="text"/> |
| Type | <input type="text"/> | Closeout Date | <input type="text"/> | <input type="checkbox"/> | Requested Action | <input type="text"/> |

Requested Action

Request to remove AF910 dated 180331 to reflect the following corrections:
1. Section II Block 1: Duty Title must reflect "Commander Support Staff" instead of "Personnel."
2. Section XII: Now includes Ratee's signature. Previous evaluation didn't include Ratee's signature.

Reason To Support Requested Action*

To ensure the member's record is accurate. Please see attached corrected copy, along with CDB and AF2096, showing the member's correct Duty Title.

Do you wish your case to be expedited?* Yes No Board Identification:

Reason For Expediting

N/A

Application Comments

Check this area for any comments back from the servicing DPBR agent regarding your application, especially when the status indicates "Returned to Member". You will be able to enter your reply comments in the box below.

Additional Justification/Clarification

In the event your application is returned to you for additional justification or clarification you will use this area to provide the requested information.

Member Information Section: This **ENTIRE** section should reflect that of the member whose record is being corrected.

Application Information Section: "Report Type," "Closeout Date," and "Requested Action" need to reflect that of the evaluation/report being corrected/replaced.

Application Information Section: Please ensure the "Requested Action" is factual and to the point. Do **NOT** be vague. The more direct your request, the less likely there will be any confusion or need for clarification.

Application Information Section: Please ensure "Reason To Support Requested Action" is factual and to the point. Do **NOT** be vague. The more direct your request, the less likely there will be any confusion or need for clarification.

NOTE: If you're making multiple corrections to an evaluation/report please make a list of those corrections, as seen in this example template (i.e. "CORRECTED COPY CHANGES.") A list assists us with processing the application efficiently.

"Application Information" Section: We highly encourage members to include a secondary contact number that differs from that provided under **Primary Phone ("Member Information" Section)** and for **"...Authorized Representative"** members to include a contact number (i.e. COMM, DSN, or cell) in the **"Additional Justification/Clarification"** block so that we may reach out if we have any questions regarding the application.

NOTE 1: Please feel free to communicate with us in regards to your case. Anytime an ERAB Application is submitted/returned to us, we always check this particular block for notes/correspondence.

NOTE 2: You do **NOT** have to wait to submit the member's following evaluation/report until the corrected/replacement copy is reflected in the member's record (PRDA/ARMS). Submit it via vPC as an EVR and provide us with the EVR# in the Additional Justification/Clarification block, so we can process it without there being any further delay or potential error/confusion.

ERAB APPLICATION FYI

- Stat Four members will need to submit their ERAB Application to AFPC via vMPF for processing.

NOTE: For guidance, questions, or overall assistance please contact your servicing MPF at NGB.HR.HR.Evaluations.Org@us.af.mil.

- ERAB Applications must be filled out accurately and in their entirety IAW AFI 36-2406. This will eliminate the need to return your application for corrections.

- All "matter of record" evaluations/reports are presumed to be accurate and objective. IAW AFI 36-2406 10.2.1.3, to overcome that presumption, the member must provide evidence to the ERAB that clearly demonstrates that an error or injustice occurred and/or that the provisions of AFI 36-2406 were violated. Unsubstantiated conjecture or personal opinion regarding the motives of an evaluator or how or why your evaluation turned out as it did do not contribute to your case. Factual, specific, and substantiated information that is from credible officials and is based on firsthand observation or knowledge is most persuasive. Statements or MFRs written by yourself on the events which you believe lead to the contested evaluation are of limited value unless supported by other credible statements or evidence.

NOTE: Please ensure the supporting documentation you provide us is factual, specific, and substantiated information.