CON	'ALUATION Date	ATION Date:				
	Part I (Completed	d by Com	nmander)		
1. Unit and Address		2.	Thru: To:	Major Commander The Adjutant General, NJDN ATTN: DPCS-EP Eggert Crossing Rd, CN340 Trenton, NJ 08625-0340		
3. Name: (Last, First, MI)		4. Rank:		5. SSAN:		
6. Date of Last Physical:* *Explain overdue physical,	7. Current if applicable	Height:		8: Current Weight	8: Current Weight	
Part II (Co	ompleted by Unit Comma	ander) (C	ircle ap _l	olicable response)		
Civilian Education: *Explain action taken to co	(NHS Grad*) mplete HS education:	(HS/	GED)	(College)		
10. Recommend for 1 year re (Yes*) *Explain actions taken to o para 4-4b. (Attach addition	(No) correct deficiency(ies). Co	unseling	stateme	nt is required IAW AR 135-20	5	
11. Retention: (Is) (Is not*) *Explain fully reason for re	Recommended ecommendation of non-re	tention: (Attach a	dditional sheets if necessary)		
12. Individual Evaluation: (E (Attach additional sheets		erforman	ce evalu	ation of individual being cons	idered.)	
Unit Commander's Name/Rai	nk			Unit Commander's S	ignature	

	Part III Board Findings				
Recommendation:					
	RETAIN	NON RETAIN			
(Date)			(Signature of Board President)		