STATE OF NEW JERSEY
DEPARTMENT OF MILITARY AFFAIRS
NATIONWIDE ONE-TIME OCCASIONAL TOUR (OTOT)
ANNOUNCEMENT

NATIONWIDE ONE-TIME OCCASIONAL TOUR (OTOT) ANNOUNCEMENT NUMBER: 26-NW-OTOT-02

POSITION TITLE: Fixed Wing Pilot-in-Command (C-12)

OPENING DATE: 2 November 2026 **CLOSING DATE:** 1 December 2026

ACTIVE DUTY TOUR: This is a three (3) year one-time occasional tour (OTOT). Acceptance and completion of this tour does not constitute AGR Career Status. This is a single term, non-renewable tour. Selectees for this position are eligible to apply for other AGR Announcements in an effort to a secure Career Status tour.

DUTY STATION: Det 19 NJARNG Operational support Airlift Command, Bldg. 3336 Wonnacott Avenue JBMDL, NJ 08640

MOS: 155E

MILITARY GRADE: This announcement is open to personnel in the grades of W2-W4.

AREA OF CONSIDERATION: Current members of the Army National Guard, Army Reserves or Regular Army who possess the military grade and qualifications listed.

SPECIAL REQUIREMENTS: Rated Army Aviation Warrant Officer in the rank of CW2 through CW4 on current and valid Aviation Service Orders. Must possess an up-to-date DD Form 2992 with no pending medical waivers. Must be a fully qualified C-12 Pilot-in-Command (PC). Candidate must maintain continuous worldwide deployability and readiness to execute unscheduled domestic and international TDY missions as operational requirements dictate.

DUTY DESCRIPTION: Serves as a C-12 Pilot-in-Command (PC); conducts domestic and international worldwide flight operations under all weather conditions, day and night, CONUS and OCONUS. Plans, coordinates, and executes complex operational support airlift missions for senior DoD, joint, and inter-agency leaders. Serves as technical and tactical subject matter expert on C-12 aircraft systems, aircrew training program (ATP) management, and instructional doctrine. Enforces strict compliance with DoD, Army, NGB, and FAA aviation regulations. Maintains 24/7 TDY availability to support high-priority worldwide taskings and executes additional unit duties as assigned.

EQUAL OPPORTUNITY: Equal evaluation, consideration and treatment based upon merit, fitness and capability irrespective of race, color, religion, sex, sexual orientation or national origin.

REQUIRED SECURITY CLEARANCE: Applicants must have or be eligible to receive a secret clearance.

GENERAL ELIGIBILITY REQUIREMENTS:

1. Applicant must meet the entry requirements of AR 135-18.
2. Applicant must the medical qualifications of AR 40-51.

STATE OF NEW JERSEY
DEPARTMENT OF MILITARY AFFAIRS
NATIONWIDE ONE-TIME OCCASIONAL TOUR (OTOT)
ANNOUNCEMENT

3. Applicant must have a current Physical Health Assessment (PHA) within 12 months on file.

4. Applicant must be certified drug free.

5. Applicant must have been tested for HIV within the past 24 months.

6. Applicant must meet physical standards of AR 600-9.

7. Applicant must have a passing record AFT current within 6 months.

8. Applicant must not be under suspension of favorable personnel actions.

9. Applicants must be at least 21 years of age and not more than 55 years old.

10. Applicant must not be entitled to receive Federal Military Retired Pay.

11. Applicant must be able to serve at least 3 years on an active-duty tour.

12. Applicants who have been involuntarily separated from the AGR program are not eligible to re-enter the program within 36 months of release from active duty, unless an approved waiver has been issued by National Guard Bureau.

HOW TO APPLY: Follow the steps below

1. Ensure that you meet the Basic Eligibility Requirements. (See below)
2. NGB Form 34-1 Application for AGR Position: **See page 4 of this announcement**
3. Complete the OTOT Application Packet Checklist. (Pg. 3)
4. The HRO-AGR Branch will not accept mailed or hand carried packets. Submit your application packet by Email. In the subject line please type: HRO, the OTOT announcement number, and your last name (**HRO/26-NW-OTOT-02/Doe**). **WE WILL NOT ACCEPT PACKETS THAT ARE ADOBE PORTFOLIOS. THE PDF MUST BE SCANNED INTO ONE SINGLE DOCUMENT** and forwarded to the following Email: **ng.nj.njarng.list.jfhq-j1-army-agr@army.mil.**
5. Your application packet must be received prior to midnight EST on the closing date: **1 December 2026**

POINT OF CONTACT: HRO-AGR Branch at **ng.nj.njarng.list.jfhq-j1-army-agr@army.mil**. Please put HRO, the OTOT announcement number, and your last name (HRO/26-NW-OTOT-02/Doe) in subject line of email.

STATE OF NEW JERSEY
DEPARTMENT OF MILITARY AFFAIRS
NATIONWIDE ONE-TIME OCCASIONAL TOUR (OTOT)
ANNOUNCEMENT

OTOT CHECKLIST

I, _____, confirm that the following items have been provided in my One-Time Occasional Tour (OTOT) application packet.

_____1. NGB Form 34-1, Application for AGR Position. On a separate sheet fully explaining any "Yes" answers to any questions in Section IV. Make sure that you enter the OTOT Announcement number and job title on your NGB Form 34-1. Sign and date your NGB Form 34-1. Ensure that all entries are legible and completed fully.

_____2. Soldier Talent Profile (STP) verified **within the past 30 days**. Provide a memorandum for any discrepancies.

_____3. Current Retirement Accounting Statement from IPPS-A (formerly NGB Form 23A).

_____4. Individual Medical Readiness Form (**Physical Health Assessment date must be current within 12 months of the announcement closing date – no exceptions**). To access MEDPROS go to https://medpros.mods.army.mil/MEDPROSNew/secure/medical/imr2.aspx. Click on "Your Individual MEDPROS Record. Under "Forms" click on IMR Record. Contact your Medical Readiness NCO to be scheduled for a walk-in PHA if necessary.

_____5. Screenshot of Army Training Information System (ATIS) of the current passing record AFT and Waist to Height Ratio (WTHtR) **(must be within 6 months of the closing date of the announcement)**. Applicant's full name, date of test, and score **must** be visible on all screen shots. Provide memorandum for discrepancy.

_____6. Last 3 Evaluations (OER). **Personnel who do not have 3 evaluations, must submit a memorandum explaining the circumstances.** Personnel without 3 Evaluations must submit letters of recommendation from his/her military leadership dated within 3 months of the Vacancy Announcement (one letter for each missing evaluation).

_____7. All DD Forms 214, substantiating every period of active-duty service. This includes Basic Combat Training (BCT) and Advanced Individual Training (AIT).

_____8. Provide a Security Clearance Verification Memorandum from your Unit or Battalion DISS Manager (NACLC, Secret, etc.) **current within 30 days of the announcement closing date**.

_____9. Photocopy of your current, valid civilian motor vehicle driver's license. All data must be readable. Individuals with suspended driving privileges are not eligible to apply.

_____10. All documents supporting your qualifications. This includes resume, civilian job evaluations and school transcripts.

_____11. Contact Info. On a separate sheet of paper, provide your civilian and military email addresses and the best contact telephone number. This information will be used to contact you for an interview. Your email address will also be used to transmit your selection/non-selection letter.

_____12. Fulltime T32-Dual Status technicians must provide a memorandum with supervisor's contact information (name, department, phone number, email).

_____13. Copy of DA Form 759 Close-out

_____14. Copy of DD Form 2992

Applicant Signature: _____

APPLICATIONS DETERMINED TO BE INCOMPLETE, INCORRECT, OR INSUFFICIENT UPON INITIAL REVIEW WILL BE RETURNED FOR CORRECTION SO LONG AS THE APPLICATION WAS SUBMITTED PRIOR TO DEADLINE. APPLICATIONS SUBMITTED AFTER DEADLINE WILL BE RETURNED WITHOUT ACTION OR CONSIDERATION. POINT OF CONTACT: HRO-AGR Branch at ng.nj.njarng.list.jfhq-j1-army-agr@army.mil

APPLICATION FOR ACTIVE GUARD/RESERVE (AGR) POSITION

The proponent agency is ARNG-HRH. The prescribing directive is NGR (AR) 600-5 / ANGI 36-101

PRIVACY ACT STATEMENT

AUTHORITY: Title 32 USC 502(f), AR 135-18, NGR (AR) 600-5, ANGI 36-101.

PRINCIPAL PURPOSE: To provide information for use in determining eligibility/qualifications for Active Guard/Reserve (AGR) positions. A copy will be provided to the applicant. The original will be maintained by the human resources office for State records. For organizational use only.

ROUTINE USES: None.

DISCLOSURE: Voluntary, however if not provided you will not be considered for the AGR program.

POSITION ANNOUNCEMENT #	POSITION TITLE

NAME *(Last, First, Middle)*	DATE OF BIRTH *(yyyymmdd)*
CURRENT HOME ADDRESS *(Street, City, State, Zip Code)*	HOME PHONE OFFICE PHONE

DATE OF ENLISTMENT *(Enlisted)*	GRADE	MOS/SSI/AFSC	ETS DATE
DATE OF FEDERAL RECOGNITION *(Officer/WO)*	GRADE	BRANCH	MRD DATE
SECURITY CLEARANCE			

SECTION I - EDUCATION AND SPECIAL QUALIFICATIONS

1. COLLEGE OR UNIVERSITY *(Accredited Colleges only, attach seperate sheet(s) if necessary.)*

Name, City & State	*Date From*	*Date To*	*Degree Program*	*Credit Hours*	*Quarter/Semester*
Chief Undergraduate Subject					
Chief Graduate Subject					

2. OTHER SCHOOLS OR TRAINING *(Vocational, Trade or Business)*

Name, City & State	*Date From*	*Date To*	*Course Title*	*Hours Completed*

3. SKILLS AND QUALIFICATIONS *(Examples - Special skills and qualifications, word processing speed (WPM), certfications on wheel and track vehicles, etc. Also list any licenses or certificates held (RN, Pilot, CPA), etc.)*

SECTION II - EMPLOYMENT HISTORY

May we contact your present employer regarding your character, qualification, and record of employment? (A "NO" answer will not affect your consideration for employment.) CHECK ONE: ☐ YES ☐ NO

1. NAME AND ADDRESS OF CURRENT EMPLOYER	DATES EMPLOYED		AVERAGE HRS. PER WEEK
	FROM	TO	
TITLE OF POSITION	IMMEDIATE SUPERVISOR & PHONE NUMBER		NUMBER OF EMPLOYEES YOU SUPERVISED
TYPE OF BUSINESS	YOUR REASON FOR LEAVING		

DESCRIPTION OF WORK *(Describe your specific responsibilities and accomplishments)*

SECTION II - EMPLOYMENT HISTORY (Continued)

OTHER EMPLOYMENT

May we contact this employer regarding your character, qualification, and record of employment?
(A "NO" answer will not affect your consideration for employment.)

CHECK ONE: ☐ YES ☐ NO

2. NAME AND ADDRESS OF PRIOR EMPLOYER	DATES EMPLOYED		AVERAGE HRS. PER WEEK
	FROM	TO	

TITLE OF POSITION	IMMEDIATE SUPERVISOR & PHONE NUMBER	NUMBER OF EMPLOYEES YOU SUPERVISED

TYPE OF BUSINESS	YOUR REASON FOR LEAVING

DESCRIPTION OF WORK *(Describe your specific responsibilities and accomplishments)*

SECTION III - MILITARY HISTORY

1. MILITARY SERVICE *(Start with most recent service and show changes in grade and duty in reverse chronological order.)*

FROM	TO	AC	ARNG/ANG	RC	GRADE	ORGANIZATION	DUTY

2. MILITARY TRAINING

FORMAL MILITARY SCHOOLING COMPLETED

COURSE TITLE AND NUMBER	DURATION OF COURSE		CORRESPONDENCE COURSES	
	WEEKS	DAYS	COURSE/SUBCOURSE TITLE	COURSE HOURS

3. MILITARY QUALIFICATIONS *(List any primary MOS/SSI which has been awarded on orders.)*

MOS/SSI/AFSC	DATE AWARDED	INDICATE HOW QUALIFICATIONS WERE OBTAINED *(Service School, On the Job Training, Civilian Experience, etc.)*

4. INDICATE ANY ON THE JOB TRAINING WHICH IS QUALIFYING FOR AN MOS/SSI WHICH HAS NOT YET BEEN AWARDED ON ORDERS

DUTY MOS/SSI/AFSC	EXACT TITLE OF POSITION	FROM	TO

SECTION IV - PERSONAL BACKGROUND QUESTIONAIRE

YES	NO	*(All Applicants Must Complete) Utilize the Continuation/Remarks section to fully explain any "YES" answers (except 9 & 17). Attach a seperate sheet of paper if more space is necessary.*
☐	☐	1. Within the last five years, have you been fired for any reason?
☐	☐	2. Within the last five years, have you quit a job after being notified that you would be fired?
☐	☐	3. Have you ever been convicted, forfeited collateral, or now under charges for any felony or firearms or explosives offense against the law?
☐	☐	4. During the past seven years, have you been convicted, imprisoned, on probation or parole, or forfeited collateral or are you now under charges for any offense against the law not included in Question 3?
☐	☐	5. While in the military, have you ever been convicted by a General Court Martial?
☐	☐	6. Does the United States Government employ, in a civilian capacity or as a member of the Armed Forces, any relative of yours by blood or marriage?
☐	☐	7. Do you receive or are you entitled to receive federal, military retired or retainer pay, service annuities, or other compensation based upon military, federal, civilian service, or eligible for immediate federal civil service?
☐	☐	8. Have you ever been removed from military service due to unsuitability?
☐	☐	9. Will you be able to complete a minimum of 5 years of continuous AGR Service prior to completing 18 years of Active Federal Service or your Mandatory Removal Date (MRD)?
☐	☐	10. Are you a candidate for an elected office, holding a civil office (full or part-time) or engaged in partisan political activities as defined in AR 600-20/ANGI 36-101/DoD Directive 1344.10, Political Activities by Members of the Armed Forces on Active Duty?
☐	☐	11. Have you been involuntarily removed from unit (Selected Reserve) service based on maximum years of service, qualitative retention or selective retention board action?
☐	☐	12. Have you been involuntarily removed from unit (Selected Reserve) service for cause or been relieved for cause from any duty assignment, including, but not limited to, relief from command in the past year?
☐	☐	13. Do you currently possess or is a report of suspension of favorable actions pending?
☐	☐	14. Have you voluntarily separated from the AGR Program in any State for one or more days within the past year? (ARNG Applicants Only)
☐	☐	15. Have you been voluntarily separated from the AGR Program or voluntarily separated in lieu of adverse action?
☐	☐	16. (OFFICERS AND WARRANT OFFICERS ONLY.) Have you been non-selected for promotion as not best qualified for promotion board convened by State Headquarters or Department of the Army Headquarters within the past 12 months?
☐	☐	17. Have you met the minimum physical fitness requirements for each component as specified by AR 600-9 (Army) or AFI 36-2905 (Air Force)?

SECTION V - CONTINUATION/REMARKS

Use the Continuation/Remarks section to fully explain any "YES" answers (except 9 & 17). Attach seperate sheet(s) of paper if more space is necessary.

SECTION VI - CERTIFICATIONS AND AUTHORITY FOR RELEASE INFORMATION

I have completed this application with the knowledge and understanding that any or all items contained herein may be subject to investigation. I consent to the release of information concerning my capacity and fitness by employer, educational institution, law enforcement agencies, and other individuals and agencies to personnel specialists for purpose of employment. I also understand that a false answer to any question in this application may be grounds for not being employed, or for being released after I begin work.

	SIGNATURE	DATE
I certify that all of the statements made by me are true, complete, and correct to the best of my knowledge and belief and are made in good faith.		