



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

**ONE-TIME OCCASIONAL TOUR (OTOT)
ANNOUNCEMENT NUMBER: 26-OTOT-12**

POSITION TITLE: Assistant S4

OPENING DATE: 2 April 2026

CLOSING DATE: 1 May 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 Vacancy Announcements in an effort to a secure Career Status tour.

DUTY STATION: HHC 44th Infantry Brigade Combat Team, 151 Eggerts Crossing Road Lawrenceville, NJ 08648

MOS: 88A, 90A, 91A

MILITARY GRADE: This announcement is open to personnel in the grades O1-O3.

AREA OF CONSIDERATION: Current members of the New Jersey Army National Guard who possess the Military Grade listed and MOS listed.

SPECIAL REQUIREMENTS: 2LTs and 1LTs must have Transportation, Quartermaster, or Ordnance BOLC completed.

DUTY DESCRIPTION: Responsible for a wide range of logistical and administrative duties, including training oversight, readiness reporting, budget management, and facility coordination. Conducts reviews of command policies and programs to ensure subordinate units meet readiness standards. Formulates, oversees, and evaluates the command's overall maintenance programs. Develops annual and long-range maintenance plans. Prepares plans and reports on readiness and mobilization. Provides guidance to units on preparing readiness and maintenance reports. Prepares and submits annual budget requirements based on training guidance and calendars. Identifies requirements and justifies requests for supplies and services, including training areas, ammunition, and rations. Provides guidance on readiness and maintenance requirements.

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



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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 in grade E5 with more than 12 years of Active Federal Service are not eligible.
10. Applicants must be at least 21 years of age and not more than 55 years old.
11. Applicant must not be entitled to receive Federal Military Retired Pay.
12. Applicant must be able to serve at least 3 years on an active-duty tour.
13. 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-OTOT-12/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.njarnq.list.jfhq-j1-army-agr@army.mil.
5. Your application packet must be received prior to midnight EST on the closing date: **1 May 2026**

POINT OF CONTACT: HRO-AGR Branch at ng.nj.njarnq.list.jfhq-j1-army-agr@army.mil. Please put HRO, the OTOT announcement number, and your last name (HRO/26-OTOT-12/Doe) in subject line of email.



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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. Selection Board Soldier Record Brief (ORB) certified **within the past 30 days**. **Please make sure you print the SRB without the DA photo.** 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 HT/WT (**must be within 6 months of the closing date of the announcement**). Applicant's name, date of test, and score **must** be visible on all screen shots. Provide memorandum for discrepancy. Provide a copy of your DA Form 5500/5501 if applicable.

_____ 6. Last 3 Evaluations (OER). **Personnel E5 and above 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 announcement closing date (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. Copy of BOLC DA Form 1059 (O1-O2 applicants only)

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.njarnq.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 separate 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), certifications on wheel and track vehicles, etc. Also list any licenses or certificates held (RN, Pilot, CPA), etc.)

SECTION II - EMPLOYMENT HISTORYMay 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
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TYPE OF BUSINESS	YOUR REASON FOR LEAVING
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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 <i>(Service School, On the Job Training, Civilian Experience, etc.)</i>

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

