NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PLATOON\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_

RIBBON (DEVICE) EARNED\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

JUSTIFICATION: (ATTACH DOCUMENTS, IF NECESSARY)

APPROVED / DISAPPROVED

DATE RIBBON (DEVICE) AWARDED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADMIN: \_\_\_\_\_

OPS: \_\_\_\_\_

XO: \_\_\_\_\_

CO: \_\_\_\_\_

DATE ENTERED IN JUMS: \_\_\_\_\_\_\_\_\_\_\_\_