

Non-Counterdrug Training Attendance Validation

NAME (Last, First)

RANK

UNIT/ORGANIZATION

Enter one date for each day of duty performed

DATE

DRILL LOCATION
(City/ZIP)

UTAs

| | | |
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| | | |

Non-CD Duty Status

Indicate only one duty status for each day performed

| Scheduled Drill | Split Training <small>*attach CD memo</small> | AFTP/ JUMP | RMP/ RMA | TDY/AT School | Leave <small>*attach leave form</small> | Sick-in- Quarters <small>*attach leave form</small> |
|-----------------------|---|-----------------------|-----------------------|-----------------------|--|---|
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

*Additional comments or information:

I certify the above named Soldier/Airman completed training on the dates indicated:

| | | | | | |
|-----------|--|-----------|--|------|--|
| UNIT POC | <input style="width: 95%;" type="text"/> | SIGNATURE | <input style="width: 95%;" type="text"/> | DATE | <input style="width: 95%;" type="text"/> |
| POC EMAIL | <input style="width: 95%;" type="text"/> | POC PHONE | <input style="width: 95%;" type="text"/> | | |

**This section to be completed by the member if also claiming directed travel mileage reimbursement.
*Must list complete address for each location***

I certify my Home of Record (HOR), Permanent Duty Station (PDS), and Drill locations are as follows:

| | | | |
|--------------------------------------|--|---|--|
| Home Of Record STREET/CITY/ZIP | <input style="width: 95%;" type="text"/> | Permanent Duty Station STREET/CITY/ZIP | <input style="width: 95%;" type="text"/> |
| Drill Location #1 STREET/CITY/ZIP | <input style="width: 95%;" type="text"/> | Drill Location #2 STREET/CITY/ZIP | <input style="width: 95%;" type="text"/> |

| | | | | | |
|--------------|--|-----------|--|------|--|
| PRINTED NAME | <input style="width: 95%;" type="text"/> | SIGNATURE | <input style="width: 95%;" type="text"/> | DATE | <input style="width: 95%;" type="text"/> |
|--------------|--|-----------|--|------|--|