

## **PERSONNEL BRIEFING**

1. I hereby certify that I have been briefed on my responsibilities, the restrictions that apply to me, and the entitlements to which I am authorized while receiving medical care and/or incapacitation pay. I certify that I specifically understand that:
2. I must report any changes in my residence to my supporting career enhancement office (DPMPE), supporting reserve pay office (RPO), and supporting medical reserve medical unit (RMU) or medical treatment facility (MTF).
3. I must contact my RMU or MTF to request AF Form 1971, Certification for Incapacitation Pay, and have a military physician complete the medical portion (Block II) monthly unless otherwise directed.
4. I am authorized to receive incapacitation pay for up to 6-months if I am unfit for military duty and/or have a loss of earned civilian income as a result of and approved line of duty injury, illness, or disease.
5. I must provide all documents to the career enhancement office in a timely manner or prepare and explanation as to why my request was delayed.
6. If my incapacitation is expected to extend beyond the initial 6-month period I must request and extension of incapacitation pay, through military channels, from the Secretary of the Air Force. I understand that I must make application for the extension of the initial 6-month period 60 days before the expiration date to preclude undue delay or denial of payment of monies.
7. I am not authorized to participate in Reserve activities for pay and/or point credit while on and AF Form 469 code "31" or "37" and receiving incapacitation pay.
8. My promotion/reenlistment eligibility and participation may be affected by my incapacitation status.
9. If applying for loss of earned civilian income only, I must provide updated written medical documentation from my treating physician since last payment.
10. Point of contact for my personnel questions is \_\_\_\_\_ at extension \_\_\_\_\_.

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(Member's signature and date)

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(Briefer's signature and date)

cc:

Member's immediate commander