

WORLDWIDE DUTY CHECKLIST				
Name/Rank:	SSAN:	DOB:		
Reserve Medical Unit:	POC:			
	DSN:			
EMAIL:				
<b><i>WWD vs MEB</i></b>			<b><i>Yes</i></b>	<b><i>No</i></b>
Is there an associated line of duty (LOD)?				
If Yes then <b>STOP</b> processing the WWD and start or associate an LOD.				
Is the LOD completed with determination of ILOD or EPTS-SA?				
If Yes then <b>STOP</b> process as case is ineligible for WWD/MEB.				
<b><i>Included with WWD case</i></b>				
Cover Letter?				
AF Form 469 (code "37")				
Narrative Summary				
IPEB Election Form	Election: Yes	No	Refuse to Sign	Date
Date Member Utilization Questionnaire (MUQ) requested from MPF:				
If MUQ not received has 60 days lapsed:				
Is statement in cover letter if MUQ was not received?				
Unit Commander Memorandum				
Date Medical Evaluation Fact Sheet signed:				
Date ME Fact Sheet waiver signed:				
Documentation from private physician (only pertinent documentation)				
<b><i>If Documents are NOT Included</i></b>				
Date request was sent certified mail:				
Include original PS 3811				
Is PS 3811 signed by the member?				
If not, date of 1 <sup>st</sup> class mailing:				
Included details of all attempts made to contact member in cover letter				
Copy of cover letter to member with attachments listed				
<b><i>Ensure all documents are included in the package</i></b>				
Signature indicates submission of a complete package				Date
POC Signature				
<b><i>For HQ AFRC/SGP use only</i></b>				
Qualified	Disqualified	RWOA		
This section is not used				