DEPARTMENT OF HOMELAND SECURITY
U.S. COAST GUARD

CAREER INTENTIONS WORKSHEET

1. EMPLID 2. Name (Last, First, MI) 3. Permanent Unit (Dept ID)

PURPOSE: Use this form to convey career intentions to the SPO. If you wish to remain with the service, complete Extension/Reenlistment and Leave sections. If your intentions are to separate from the service contact your servicing HSWL Transition/Relocation Manager for Pre-Separation Counseling before completing the Separation and Leave sections of this form.

4. Answer these questions. If you answer no to these questions, contact your career counselor or unit administrative staff/SPO

☐ Yes ☐ No Has your unit conducted a 6-month predischarge interview and if you are separating, completed a Preseparation Counseling Checklist?

☐ Yes ☐ No Have you been advised on the subject of SRB eligibility and, if separating, Reserve Enlistment/Affiliation Bonuses?

☐ Yes ☐ No Are you a U. S. Citizen? (If no, you cannot reenlist or extend without authority from CGPSC) (Note: See 1.A.5.e., COMDTINST M1000.2 (series) for exceptions)

☐ Yes ☐ No My command has advised me on my eligibility and recommendation for reenlistment or extension of enlistment.

6. I plan to...

☐ Extend ☐ Enlist in the CG Reserve ☐ Reenlist (min. 3 years for regulars)

7. For Number of Years (Note: if reenlisting, the minimum is 3 years)

☐ 1 yr ☐ 2 yrs ☐ 3 yrs ☐ 4 yrs

☐ 5 yrs ☐ 6 yrs ☐ 8 yrs* ☐ Other ________

(Reserve enlistments/reenlistments may be for a period of two, three, four, five, six, or *eight years.)

9. Person administering the oath for extension agreement/reenlistment

Name: ___________ Rank: ___________ Title: ___________

10. Reason for Extension/Re-extension of Enlistment:

☐ Request of individual ☐ Authorized by Commander CGPSC

☐ School training requirement ☐ Obligated service for advancement

☐ Obligated service for transfer ☐ Obligated service for SRB bonus

☐ Obligated service for retirement ☐ Other (specify):

☐ Participation in tuition assistance program ☐ Completion of deployment aboard vessel

11a. Selective Reenlistment Bonus

Zone (check one): ☐ “A” ☐ “B” ☐ Not Eligible

Multiple: __________ for ________ Competency Code

Kicker Multiple: __________

11b. SELRES Bonus

☐ Not Eligible

☐ Affiliation ☐ Prior Service Enlistment Bonus

Will lateral to __________ Rating (if applicable)

Assignment to Critical Unit __________ (if applicable)

(Reserve enlistments/reenlistments may be for a period of two, three, four, five, six, or *eight years.)

12. I am being discharged involuntarily

13. I want to be discharged (military obligation completed)

14. I want to be discharged (military obligation completed) and enlist into the CG Reserve for _____ years and be assigned to the ☐ SELRES ☐ IRR. (also use blocks 6 to 9 and 11b to provide details for your enlistment contract)

15. I want to be released from Active Duty (Active Duty obligation completed/Reserve RELAD) and be assigned to the ☐ SELRES ☐ IRR.

16. Request to be released/discharged _____ - days early (NTE 30) to pursue a unique schooling or career opportunity per 1.B.8, Military Separations, COMDTINST M1000.4 (series).

For blocks 12-16 I have discussed SELRES opportunities with ☐ RFRS ☐ Gold/Silver Badge ☐ SERA.

17. Retire as directed by CGPSC (epm/opm) orders dated: ____________

I will perform travel to: ____________

My home of selection is: ____________

(You have up to one year to make/choose your home of selection.)

18. Have you had a physical examination dated one year or less from your upcoming separation date? (Note: If you answered “No”, you must complete a physical during the year prior to your separation.)

☐ Yes ☐ No

19. Do you want health care coverage under the Continued Health Care Benefit Program (CHCBP)? Contact the CHCBP Administrator at 1-800-444-5445 Option #1 then Option #3 or see https://tricare.mil/chcbp for information on the program.

Visit https://www.dcms.uscg.mil/ppc/ras /RetirementProcessing/ to obtain your Retirement Package

CG-2045 (02/21) Reset
20. If Disch/Relad I will perform travel to my: ☐ Home of Record ☐ Place of Enlistment/Acceptance ☐ Will not be moving

21. Mode of travel will be (check one): ☐ POC ☐ Gov't Ticket

22. I request advance travel SF Form 1038 is attached: ☐ Yes ☐ No

23. Do you occupy government quarters? ☐ Yes ☐ No If yes, enter date you will terminate quarters: _______________

24. LEAVE SECTION (Complete for Separations, reenlistments and first extensions of enlistment).

• If your leave plans change after completing this worksheet, immediately notify your SPO. Failure to do so may result in an overpayment for which you will be responsible.

• Regular, Active Duty, members are only authorized to sell a TOTAL of 60 days leave during their career. The 60-day career limitation does not apply to Reservists and Retirees recalled to AD for a contingency operation or Reservists on AD for 31-365 days.

• If separating from the regular component you must use or sell all leave. Reservists being released from Active Duty and resuming SELRES status may carry unused or unsold leave forward.

• If you are reenlisting or extending, unused leave will automatically be carried forward into your new service obligation.

I plan to (select any that apply):

☐ sell _____ days of leave and/or carryover _____ days leave

☐ take terminal leave starting (date): ________________ (Note: Member/Unit, do not enter terminal leave in the DA Self-Service Absence Request. Terminal leave will be recorded by the SPO on the separation transaction or, for discharges, the non Self-Service Absence Request.)

☐ take leave prior to my separation for periods listed below (Note: Member/Unit must input the following periods in DA Self-Service Absence Request)

Enter inclusive leave dates (continue on separate page if necessary):

☐ more leave dates on separate page

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25. If separating, enter your final mailing address (This is where your W-2 will be mailed next year):

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<th>Address</th>
<th>County</th>
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<th>City</th>
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26. If separating, enter name and address of a relative to be contacted if you cannot be reached at the final mailing address:

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27. FOR RETIREMENT ONLY:

☐ I have been authorized by CGPSC EPM/OPM and my Command to utilize retirement processing station permissive orders IAW COMDTINST M1000.4 (series) Art 1.C.1.e.

☐ I have been approved by my command to utilize 20 (30 if OUTCONUS) days permissive temporary duty IAW COMDTINST M1000.4 (series) Art 1.C.1.f.

Use in the following order: Permissive temporary duty, processing point permissive orders, and terminal leave.

Contact your admin office for assistance in determining your departure date when using any combination of the above.

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<th>Processing Point*: From</th>
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<th>Terminal Leave Dates: From</th>
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* (Note: Do not input these dates on the retirement transaction or leave transaction in Direct-Access.)
### PRIVACY ACT STATEMENT

Pursuant to 5 U.S.C. §552a(e)(3), this Privacy Act Statement serves to inform you of why DHS is requesting the information on this form.


**PURPOSE:** Information is to convey your career intentions to USCG officials for processing your separation from or retention in the service.

**ROUTINE USES:** Authorized USCG officials will use this information process a member's retention in or separation from the service. Any external disclosures of information within this record will be made in accordance with DHS/USCG-014, Military Pay and Personnel, 76 Federal Register 66933 (October 28, 2011).

**CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION:** Providing this information is voluntary. However, without disclosure of this information the member's career intentions may not be known which may cause document processing and pay problems.