

## STATE ACTIVE DUTY (SAD) CHECKLIST

Service Member's Name	Rank	Unit	MACOM/MAJCOM	Perferred Email
Service Member's Full HOR		AFSC/MOS		Service Member's Contact Number

When does the SM expect to end State Active Duty?

Current Federal Technician - *(Approval to join will require LCC or Group CC authorization)*

**Any items below marked "Yes" will need TAG authorization to start SAD**

Medically non-deployable

Is ETS in the next 12 Calendar Months - *If "Yes" what's SM current ETS?*

Coded as pending loss, pending civilian or military legal action or adverse action

Current AGR or Temp AGR

Currently on Title 10, Title 32, or already on SAD orders

Attending service schools during expected SAD duration - *If "Yes" list dates:*

Temporary duty (TDY) during expected SAD duration - *If "Yes" list dates:*

Out of state annual training during expected SAD duration - *If "Yes" list dates:*

Notice of activation within 120 days

Currently assigned to the Civil Support Team (CST)

Current Law enforcement officer/First responder - *If "Yes" list agency:*

Current Correction/Detention Officer - *If "Yes" list agency:*

Absent Without Leave (AWOL) during last unit training period

Current or future known military or civilian confinement

Current or future known hospitalization

Currently affected by the Lautenberg Amendment or otherwise not allowed to arm Pending

Currently enrolled in alcohol and drug counseling action to include having an unresolved positive test result

**Organic Unit Representative:** Member

require TAG release for SAD participation.

**Readiness NCO/UDM Email**

**Readiness NCO/UDM Signature**

## State Active Duty (SAD) Acknowledgment Form

This form is to ensure that the member understands and agrees to the benefits and limitations of a State Active Duty mission. If member does not acknowledge each point and provide a signature at the bottom, member will not be considered for State Active Duty.

1. I understand that while on State Active Duty (SAD), I do not earn points towards a military retirement.
2. I understand that while on State Active Duty (SAD), I do not earn credit towards an early military retirement or Post 9/11 GI Bill benefits.
3. I understand that while on State Active Duty (SAD), should I get injured or sick that I am subject to State Worker's Comp and not entitled to a military Line of Duty (LOD).
4. I understand that while on State Active Duty (SAD), I am considered a temporary civilian state employee and I may see a difference in my take home pay (net pay) based on factors like self elected withholdings, taxable income changes, and state retirement plan (If applicable).
5. I understand that if on State Active Duty (SAD) for greater than 30 days, I am responsible for my own health insurance. I may elect to pay for insurance offered through the State, Tricare Reserve Select, or other insurance options.
6. I understand that if on State Active Duty (SAD) for greater than 30 days, I am still required to meet my organic unit's IDT/drill schedule expectations, and my service on SAD does not preclude my IDT/drill requirement.
7. I understand that on State Active Duty (SAD), I am responsible to communicate with my organic unit. Lack of communication with my organic unit may result in my removal from SAD.
8. I understand that if on State Active Duty (SAD) for greater than 30 days, I earn approximately 2.5 days of accrued leave each month. I understand there is no maternity/paternity, sick, nor advance leave.
9. I understand while on State Active Duty (SAD), I cannot be dual-compensated by SAD pay and military service pay. i.e., I cannot be compensated SAD pay while simultaneously receiving military (Army/Air) pay. *Example:* paid by SAD while on IDT/drill, AT, or any military order. *Exception:* SM can utilize SAD-accrued-leave while on IDT/drill, AT, or any military order.
10. I understand while on State Active Duty, any mission end-date provided to me is estimated and subject to change. Some factors include, but are not limited to, Arizona Governor authorization, operational limitations, and or funding. Furthermore, due to these circumstances, I am expected to personally and professionally plan accordingly.

**I understand ALL the above and I am agreeing to volunteer for State Active Duty(SAD).**

**Service Member Signature**

**Company/Squadron or Group Commander Signature**

**J1 Representative:**

**J1 Rep Signature**

Member is

for SAD participation

# Arizona State Active Duty (SAD) Employment Information Form

Name (Last, First): \_\_\_\_\_ Grade: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Organic Unit: \_\_\_\_\_

Personal Email: \_\_\_\_\_ Mil Email: \_\_\_\_\_

Are you a State or County Employee? (e.g. ADOC, ADPS, ADJC, ADHS, etc) \_\_\_\_\_

- If so, what agency or county? \_\_\_\_\_ Job title? \_\_\_\_\_

Have you ever served on a State Active Duty Mission? \_\_\_\_\_

- If so, what mission? \_\_\_\_\_ What year(s)? \_\_\_\_\_

EIN if applicable: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address: <- Same as HOR \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

DoD ID: \_\_\_\_\_ SSN: \_\_\_\_\_ Pay Date: \_\_\_\_\_ YOS: \_\_\_\_\_

DOB: \_\_\_\_\_ Dependents: \_\_\_\_\_ MOS/AFSC: \_\_\_\_\_

What is your current military status? (Click more than one if applicable)

M-Day/DSG

ADOS Orders

AGR

Technician

When does your military term end? (i.e. end date of current enlistment) MM \_\_\_\_ YYYY \_\_\_\_

List All Upcoming IDT/UTA and AT Dates:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

J1/J8 Office Only

SM Daily Rate

\$ \_\_\_\_\_

Flip to Backside

By signing this form, I am certifying that I have listed all known IDT/UTA Periods and Annual Training.

Furthermore, if I am ordered to attend any training or military schooling while on SAD I am to notify Joint Task Force Personnel so I am not dual compensated.

I understand that I am not to be dual-compensated from both the military and state (e.g., Drill, AT, Orders etc.). If I am paid from both State Active Duty and the military for the same time period, I must inform my leadership so funds can be recouped (paid back).

If I am a Technician, I am certifying that I am in a leave status, (not military leave or military furlough), during my scheduled technician hours that coincide with my State Active Duty Orders.

**Service Member Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**SALE or TF Badge**

JTF-AZ: Please submit this form with GAO-65, A-4, W-4, and Banking Info to State Payroll.

# Background Information

Internal Use Only				
Check: <b>Current SAD</b>		<b>New Hire</b>		
Date of last SAD background if applicable:				
Last Name		First Name		Middle Name
Previous / Maiden Name / other names used				
Street Address				
City	State	Zip Code	Phone Number	
Previous Street Address				
City	State	Zip Code	Phone Number	
Place of Birth				
City	State	Country	DOB / YYYY-MM-DD	
Height	Weight	Hair Color	Eye Color	Race
Drivers License #	Issuing State	Social Security Number		Gender

**Note to Applicant:** A thorough personal history background investigation will be completed by a Law Enforcement Agency prior to initiating or continuing a tour of duty with SAD. Please **initial** the following statements before proceeding to the questions on page two.

You must attach documentation to include court dispositions and/or detailed explanations for all offences. The lack of documentation may result in rejection from the selection process or continued orders with SAD.

Existence of any of the conditions listed in the background application may result in rejection from the selection process or continued orders with SAD.

I Certify that all statements in the application are true and agree and understand that any misstatements or omissions of material facts herein will cause forfeiture on my part of all rights to employment with the SAD and Task Force SAFE.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness Signature: \_\_\_\_\_

Printed Witness Name: \_\_\_\_\_

Last	First	Middle
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**Note to Applicant:** Supporting documentation must be included with this background form for any "Yes" answer. If charges were dropped or reduced, include a copy of the disposition.

**I. Any Arrest, Conviction, or History (there is no timeline or age associated with the following questions)**

Yes / No

- 1. Drug manufacturing/cultivation/trafficking/sale/possession with intent to sell
- 2. Serious violent behavior (i.e. Sexual assault, rape, criminal sexual misconduct, aggravated assault, arson, child abuse, domestic violence, manslaughter, armed robbery)
- 3. Major honesty issues (extortion, embezzlement, perjury, fraud)
- 4. Convicted felon
- 5. Illegal use of firearm or explosive
- 6. Immigration or customs violations (smuggling of any type, entry without inspection, etc.)
- 7. Subject of a current investigation by any law enforcement agency
- 8. Prior/current gang affiliation
- 9. Multiple DWI/DUIs

**II. One arrest or conviction within 3 years or 2 or more within 7 years unless otherwise stated**

Yes / No

- 1. Illegal/habitual use of dangerous drugs, narcotics, or vaporous substances more than five (5) times total or more than one (1) time since the age of 21, or at any time within the past seven (7) years
- 2. DWI/DUI
- 3. Theft or forgery
- 4. Patterns of conduct (i.e.: alcoholism/drug addiction, financial irresponsibility/major liabilities, dishonesty, un-employability for negligence or misconduct, criminal conduct)
- 5. Suspended drivers license
- 6. Any abuse of prescription or illegal drug use to include marijuana

**III. Three or more occurrences in 1 year Yes / No**

- 1. Minor liquor law violations
- 2. Minor traffic violations
- 3. Bad checks
- 4. Minor disruptive conduct (i.e.: trespassing/vagrancy/loitering/disturbing the peace)

**IV. Other considerations. If any of the statements listed below apply, supporting documentation must be included.**

- 1. Pattern of behavior or actions that reasonably indicate a contemptuous attitude toward the law as determined by law enforcement (i.e.: repeated or multiple offences)
- 2. Demonstrated pattern of poor financial management/indebtedness which has resulted in one or more repossessions, foreclosures, submission of bills to a collection agency, etc. as determined by law enforcement
  - a. Bankruptcy/foreclosure: all current debt must be up to date with no delinquencies or outstanding collection accounts
  - b. Failure to pay child support, loan payments, bills, etc.
- 3. Probation or Diversion Program in lieu of a criminal conviction or consequence (i.e. jail, probation, and fees) (new hire applicants only)
- 4. Facts omitted or not complete on the background questionnaire and/or the lack of applicable supporting documentation will be considered a breach of integrity and result in the failure of the background.