

DEPARTMENT OF THE ARMY
2nd BRIGADE COMBAT TEAM, 10TH MOUNTAIN DIVISION (LI)
10200 NORTH RIVA RIDGE LOOP
FORT DRUM, NEW YORK 13602

AFDR-BBA-CDR

5 MARCH 2020

MEMORANDUM FOR Commander, U.S. Army Human Resources Command, Officer Separations, (AHRC0OPL-R), 1600 Spearhead Division Avenue, Fort Knox, KY 40121

SUBJECT: Victim of Sexual Assault Statement for Administrative Separation

1. DOD Instruction 6495.02 and AR 600-20, Chapter 8 Sexual Assault Prevention and Response Program requires Soldiers being administratively separated to sign a statement answering the following questions:

(a) Did you file an unrestricted report of a sexual assault in which you were a victim within the past 24 months: YES or NO

(b) If the answer to (a), above, is YES, do you believe that this separation action is a direct or indirect result of your sexual assault, or your reporting of the sexual assault? YES or NO N/A

2. The point of contact for this action is the undersigned at {DSN email.us@mail.mil}

{YOURNAME}
{RANK, BRANCH}