P3T Planned Absence Notification Slip (P.A.N.S)

Rank, Last Name, First Name

Group: Please Circle One

*RETURN TO P3T NCOIC/IT

Soldier's Name:

1   2   3   PP

Today's Date:

Date(s) of Absence:

Supervisor's Name (Print):

Reason for Absence
(Appt.UA,SD,Mission):

Supervisor's Phone#:

Supervisor's Signature: Date:

Signature indicates acknowledgment of absence & responsibility for accountability on date of absence

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