

DEVELOPMENTAL COUNSELING FORM

For use of this form, see ATP 6-22.1; the proponent agency is TRADOC.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: 5 USC 301, Departmental Regulations; 10 USC 3013, Secretary of the Army.
PRINCIPAL PURPOSE: To assist leaders in conducting and recording counseling data pertaining to subordinates.
ROUTINE USES: The DoD Blanket Routine Uses set forth at the beginning of the Army's compilation of systems or records notices also apply to this system.
DISCLOSURE: Disclosure is voluntary.

PART I - ADMINISTRATIVE DATA

Name (Last, First, MI)	Rank/Grade	Date of Counseling
Organization	Name and Title of Counselor	

PART II - BACKGROUND INFORMATION

Purpose of Counseling: (Leader states the reason for the counseling, e.g. Performance/Professional or Event-Oriented counseling, and includes the leader's facts and observations prior to the counseling.)

Event-Oriented Counseling: Army Physical Fitness Test Excellence

PART III - SUMMARY OF COUNSELING

Complete this section during or immediately subsequent to counseling.

Key Points of Discussion:

On 28 May 2015, You were administered an APFT in which you obtained the following scores: Push-up (Rep/Score) _____, Sit-up (Rep/Score) _____, and 2 mile run (Time/Score) _____. You scored over 90 points in each event to obtain a superior score of 289.

As a result of your excellent performance during this APFT I am recommending the following action be taken:

1. Awarded the Army Physical Fitness Badge, which is worn on your APFU shirt and jacket.
2. You will be given the option to conduct individual PRT, except for Friday, due to Battalion/Company Runs.
3. You will be recommended for a Company Certificate of Achievement and Company Coin.
4. You will be awarded a three day pass. (IAW Commander's Policy Letter #7)
5. Other: _____.

In addition I am congratulating you on your performance and challenge you to maintain those high standards. You have lead by example and represented for yourself and platoon. Continue to work hard and strive to score a 300 on your next APFT. In seeking this goal, continue to encourage your peers and subordinates to do the same. Again, great job!!

OTHER INSTRUCTIONS

This form will be destroyed upon: reassignment (*other than rehabilitative transfers*) , separation at ETS, or upon retirement. For separation requirements and notification of loss of benefits/consequences see local directives and AR 635-200.

Plan of Action (Outlines actions that the subordinate will do after the counseling session to reach the agreed upon goal(s). The actions must be specific enough to modify or maintain the subordinate's behavior and include a specified time line for implementation and assessment (Part IV below)

Soldier will strive to score 300 on next APFT

Session Closing: (The leader summarizes the key points of the session and checks if the subordinate understands the plan of action. The subordinate agrees/disagrees and provides remarks if appropriate.)

Individual counseled: I agree disagree with the information above.

Individual counseled remarks:

Signature of Individual Counseled: _____ Date: _____

Leader Responsibilities: (Leader's responsibilities in implementing the plan of action.)

Submit COA and coin request.

Monitor progress when conducting individual PRT.

Signature of Counselor: _____ Date: _____

PART IV - ASSESSMENT OF THE PLAN OF ACTION

Assessment: (Did the plan of action achieve the desired results? This section is completed by both the leader and the individual counseled and provides useful information for follow-up counseling.)

Counselor: _____ Individual Counseled: _____ Date of Assessment: _____

Note: Both the counselor and the individual counseled should retain a record of the counseling.