

## INSTALLATION QUALITY OF LIFE ISSUE

For use of this form, see DA Circular 608-04-1; the proponent agency is ACSIM

1. ISSUE	2. DATE
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3. SCOPE

4. RECOMMENDATION

5. ACTION TAKEN

6a. BOSS PRESIDENT	6b. BOSS PHONE NUMBER
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7. INSTALLATION CSM	8. MWR ADVISOR
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9. EXTERNAL COORDINATION <i>(If necessary)</i>				
a. ACTIVITY	b. CONCUR		c. INITIALS	d. DATE
	YES	NO		

10. DCA

11a. CG RECOMMENDATION <input type="checkbox"/> Approval <input type="checkbox"/> Disapproval <input type="checkbox"/> Other	11b. DATE
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12. AFAP *(If necessary)*