Downgrade/Decommissioning Request

Ship Information					
Current Ship:		Current Class Code:		Hull#:	
Street Address:					
City:					
State/Province:		Zip:			
Country:					
Phone Contact:		Email:			
Web Page:					
For Downgrade use:					
Class Requested:		New Class Code:		Hull#:	
Name Requested:		Class-Type:	Select One		

Command Crew Information			
Commanding officer			
Name:			
RMN ID:		Current Rank:	
Date of Birth:		Highest Main Line Course Completed:	
Phone:			
Email:			
Executive Officer			
Name:			
RMN ID:		Current Rank:	
Date of Birth:		Highest Main Line Course Completed:	
Phone:			
Email:			
Bosun			
Name:			
RMN ID:		Current Rank:	
Date of Birth:		Highest Main Line Course Completed:	
Phone:			
Email:			

Regular Crew Information, Officers			
Current Rank:	Name:	Highest ML Test:	RMN ID:

Downgrade/Decommissioning Request

Regular Crew Information, Enlisted			
Current Rank:	Name:	Highest ML Test:	RMN ID:

Reasoning for decommission:

Approvals			
Fleet Commander:		Date:	
BuShips:		Date:	

BuShips Use Only:					
City Of Charter:					
Submitted to Bupers for assignment of crew:					
Ship Transferral					
Active reserve?	YES – NO		Inactive Reserve?	YES – NO	
Transfer to Different Fleet?	YES – NO		Receiving Fleet:		
City:					
State/Province:			Zip:		
Country:					
Phone Contact:			Email:		
Web Page:					

Notes: