

**NOTIFICATION OF EXPIRATION OF ACTIVE OBLIGATED SERVICE (EAOS)**

\_\_\_\_\_  
(Date)

MEMORANDUM

From: Officer in Charge, U.S. Navy Personnel Support Activity  
Detachment, \_\_\_\_\_

To: \_\_\_\_\_

Via: Command Career Counselor, \_\_\_\_\_

Subj: NOTIFICATION OF EXPIRATION OF ACTIVE OBLIGATED SERVICE (EAOS)

Ref: (a) EDVR for UIC \_\_\_\_\_ dated \_\_\_\_\_

1. Review of reference (a) indicates your EAOS is \_\_\_\_\_.
2. You are requested to complete the lower portion of this form and return it to this detachment no later than \_\_\_\_\_ to prevent disruptions in your pay allowances and to allow the detachment to monitor your intentions.

\_\_\_\_\_  
By direction

\_\_\_\_\_  
(Date)

MEMORANDUM

From: \_\_\_\_\_

To: Officer in Charge, U.S. Navy Personnel Support Activity  
Detachment, \_\_\_\_\_

Via: Command Career Counselor, \_\_\_\_\_

Subj: NOTIFICATION OF EXPIRATION OF ACTIVE OBLIGATED SERVICE (EAOS)

1. I desire to:

- ( ) Reenlist on \_\_\_\_\_ for \_\_\_\_\_ years.
- ( ) Extend my enlistment duty for \_\_\_\_\_ months. (USNR ONLY)
- ( ) Extend my active duty service for \_\_\_\_\_ months. (USNR ONLY)
- ( ) Extend my reserve enlistment for \_\_\_\_\_ months to cover my requested extension of active duty service. (USNR ONLY)
- ( ) Separation/Discharge at EAOS.

2. I have submitted the applicable request chit(s) and understand that I must have a completed physical examination before I can reenlist or extend my enlistment for greater than 24 months or transfer for separation.