OFFICER EX For use of this form, see USAC	FOR OFFICIAL USE ONLY (FOUO)	EFFECTIVE DAT	E (YYYYMMDD)	PAGE OF	PAGES								
PRIVACY ACT STATEMENT AUTHORITY. The authority for the Privacy Act for evaluations are Section 301, Title 5, United States Code (5 USC301) and 10 USC 3013. PURPOSE. Evaluations will serve as the primary source of information for officer and enlisted personnel management decisions and will serve as a guide for the Soldier's performance and development, enhance the accomplishment of the organization mission, and provide additional information to the rating chain. ROUTINE USE. Evaluations will be maintained in the rated Soldier's official military personnel file (OMPF). A copy will be either given directly to the rated Soldier or sent to a forwarding address. DISCLOSURE. Disclosure of the rated Soldier's Social Security number (SSN) is voluntary. Failure to verify the SSN may result in a delayed or erroneous processing of the evaluation report.													
TO: COMMANDER, USACE (C COPY FURNISHED: EACH	EHR-MS), WASHINGTON, D.C. 20314 I PERSON LISTED	4-1000 FROM											
RATED OFFICER (Name,Last, First MI./Grade/SSN/ Duty Title) a	RATER (Name,Last, First MI./Grade/SSN/ Duty Title) b	INTERMEDIATE RATER (Name,Last, First MI./Grade/SS Duty Title) c	SENIOR SN/ (Name,Last, First Duty d	MI./Grade/SSN/ Title)	S/R MILPO e	LETTER REPORT (Yes/No) f	DUAL SUPER. (Yes/No) g						

OFFICER EVALUATION REPORT RATING CHAIN (Continuation)				R OFFICIAL USE ONLY <i>(FOUO)</i>	EFFECTIVE DAT	E (YYYYMMDD)	PAGE OF	PAGES
RATED OFFICER (Name,Last, First MI./Grade/SSN/ Duty Title) a	RATER (Name,Last, First MI./Grade/SSN/ Duty Title) b	INTERMEDIATE RATER (Name,Last, First MI./Grade/SS Duty Title) c	SN/	SENIOR RATER (Name,Last, First MI./Grade/SSN/ Duty Title) d		S/R MILPO e	LETTER REPORT (Yes/No) f	DUAL SUPER. (Yes/No) g
AUTHENTICATION DATE (YYYYMMDD) AUTHE		IENTICATION SIGNATURE						