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(Letterhead)

(Office symbol) (MARKS number)

(Date)

MEMORANDUM FOR (Appropriate Agency)

SUBJECT: Evaluation Report Appeal (Report period)  
(Appellant's Name, Rank, PMOS, SSN)

1. Under the provisions of AR 623-205, chapter 6, I appeal the evaluation report (Report period). (Include pending personnel actions and appeal processing priority.)
2. The basis of this appeal is substantive inaccuracy. (Use this paragraph to briefly identify the specific portion of the report and the basis of your disagreement. Avoid general allegations. Be clear, brief, and specific. If a detailed explanation is essential to your appeal, include your own statements as an enclosure to the appeal. Limit the information in this letter to basic facts. Be sure to support your appeal with relevant statements from knowledgeable observers.)
3. (Request the specific corrective action you believe is justified by the evidence you provide. Your request may be a single change to one portion or removal of the entire report. Your request must be supported by sufficient evidence to warrant such correction.) (If the NCO-ER exceeds the 5-year limit as outlined in paragraph 6-7, add a paragraph explaining why a waiver should be granted. Only exceptional justification will be accepted by the ESRB who is the approval authority on the waivers.)
4. (Provide a telephone number, preferably DSN.)

Encls  
(number and list encls of  
appropriate evidence)

(Signature block)  
(Mailing address if other  
than address on letterhead)

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Figure 6-2. Sample format of substantive appeal

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(Letterhead)

(Office symbol) (MARKS number)

(Date)

MEMORANDUM FOR (Appropriate Agency)

SUBJECT: Evaluation Report Appeal (Report period)  
(Appellant's Name, Rank, PMOS, SSN)

1. Under the provisions of AR 623-205, chapter 6, I appeal the evaluation report (Report period). (Include pending personnel actions and appeal processing priority.)

2. This appeal is based solely on administrative error. (Identify each portion of the report with which you disagree. State the entry as it now appears and as it correctly should appear.)

3. (Include certified true copies of related documents to support your request, for example, rating schemes in effect throughout the entire report period, orders, leave and earning statements, APFT score (DA Form 705) or other verifying documents. Original statements from knowledgeable individuals also may support your request.)

4. (Be sure to include a telephone number, preferably DSN. Notify addressee promptly if your address changes.)

Encls

1. Copy of Report  
(number and list encls)  
of appropriate evidence)

(Signature block)

(Mailing address, if other  
than address on letterhead)

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Figure 6-3. Sample format of administrative appeal

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(Letterhead)

(Office symbol) (MARKS number)

(Date)

MEMORANDUM FOR (Appropriate Agency)

SUBJECT: Evaluation Report Appeal (Report period)  
(Appellant's Name, Rank, PMOS, SSN)

1. Under the provisions of AR 623-205, chapter 6, I appeal the evaluation report (Report period). (Include pending personnel actions and appeal processing priority.)
2. This appeal is based on both administrative and substantive error.... (Identify the specific portion of the report you believe is in error. State the entry as it now appears and as it should appear. Support your claim of technical error with certified true copies of verifying documents, for example, rating schemes in effect throughout the entire rating period, orders, duty appointment memorandum, leave and earnings statements, APFT score (DA Form 705) or other related documents.)
3. The substantive error is (Identify the specific portions of the report and state your disagreement. Be clear, brief and specific. Limit your explanation to basic facts. If detailed information is essential, add your own statement as an enclosure to the appeal. Provide original statements from knowledgeable individuals independent of the rating chain. Statements from the rating officials may be added as supplemental information.)
4. (Request the specific changes you believe are justified by the evidence you provide. Your request may be a combination of changes or total removal of the report. Remember that you must document your request with sufficient evidence to warrant corrective action.) (If the NCO-ER exceeds the 5-year limit as outlined in paragraph 6-7, add a paragraph explaining why a waiver should be granted. Only exceptional justification will be accepted by the ESRB who is the approval authority on the waiver.)
5. (Provide a telephone number, preferably DSN.)

Encls

1. Copy of Report  
(number and list encls of  
appropriate evidence)

(Signature block)  
(Mailing address if other  
than address on letterhead)

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Figure 6-4. Sample format of combined administrative and substantive appeal

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