

COAST GUARD FORMAL PHYSICAL EVALUATION BOARD (FPEB) FINDINGS AND RECOMMENDED DISPOSITION

1. ADBD: _____ **SECTION I – DATA CONCERNING EVALUEE**

2. Name (<i>Last, First, Middle</i>)	3. Grade or Rate	4. Employee Identification No.	5. Date
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6. Creditable Active Duty Service Years _____ Months _____ Days _____	7. Age of Evaluatee Years _____ Months _____	8. Status (<i>check one</i>) USCG USCGR
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SECTION II - FINDINGS

FINDINGS	(N) WILLFUL NEGLECT (M) INTENTIONAL MISCONDUCT (A) UN- AUTHORIZED ABSENCE	INCURRED WHILE ENTITLED TO RECEIVE BASIC PAY (YES OR NO)	PROXIMATE RESULT OF PERFORMANCE OF ACTIVE DUTY OR INACTIVE DUTY TRAINING OR INCURRED IN LINE OF DUTY DURING WAR OR NATIONAL EMERGENCY (YES OR NO)	DISABILITY IS COMBAT RELATED* (YES OR NO) (SW, IN, HS, AC)	DISABILITY PERCENTAGE	VASRD DIAGNOSTIC CODE NUMBER
10.	11.	12.	13.	14.	15.	16.

17. COMBINED PERCENTAGE OF DISABILITY ►

* Your disability resulted from a combat related injury as defined by 26.U.S.C. 104. For additional information, you should contact the Department of Veterans Affairs.

18. Yes No Mentally incompetent or disclosure to the evaluatee or information relative to his/her physical or mental condition would adversely affect physical or mental health.

19. Yes No Physically and/or mentally unfit. Substantial evidence demonstrates that evaluatee cannot perform regular or customary assigned duties.

SECTION III – RECOMMENDED DISPOSITION

20. Check Appropriate Box: Return to Duty Temporary Retirement Permanent Retirement
 Separation With Severance Pay Separation without Severance Pay

SECTION IV – SIGNATURE OF FPEB BOARD MEMBERS

Typed Name and Grade of Board President	Signature	Date
Typed Name and Grade of Medical Member	Signature	Date
Typed Name and Grade of Military Member	Signature	Date
Typed Name and Grade of Reservist or Other Member	Signature	Date

SECTION V – EVALUEE RESPONSE TO FPEB

NOTICE TO EVALUEE: THE EVALUEE MUST DECIDE WHETHER OR NOT TO FILE A REBUTTAL WITHIN 3 WORKING DAYS FROM THE DATE OF THE FINAL ADJOURNMENT OF THE BOARD, OR UPON RECEIPT OF THE FINDINGS, WHICHEVER OCCURS LATER, AND NOTIFY THE FPEB IN WRITING OF THE DECISION, IN ACCORDANCE WITH PARAGRAPH COMDTINST M1850.2 (SERIES) 5.D.2

I accept the tentative FPEB findings and recommended disposition and do not intend to submit a rebuttal.

I further do not waive the 21 calendar day waiting period.

I intend to submit a rebuttal.

(Signature of Evaluatee)	(Date)
(Signature of Legal Counsel)	(Date)

FOR PSD-de USE ONLY: Member signed facsimile copy of CGHQ-4808, dated _____

SECTION VI – REBUTTAL FOLLOWING FORMAL BOARD HEARING

Rebuttal received and attached to record
 Period during which rebuttal may be filed has elapsed and no rebuttal has been received
 Evaluatee has indicated in Section V that he/she will not file a rebuttal
 Right to file a rebuttal is forfeited. Evaluatee did not notify the FPEB in writing within three days of final adjournment of intent to file a rebuttal

SECTION VII – ACTION OF THE PHYSICAL REVIEW COUNCIL

DECISION

Concur with Formal Physical Disability Evaluation board
 Return to FPEB
 Other

NOTED ERROR OR OMISSION

Incorrect assignment of VASRD code(s)
 Pyramiding of impairments
 Incorrect percentage of disability assigned to the VASRD descriptive diagnosis/code(s)
 Insufficient evidence to support the findings and recommended disposition

SIGNATURE OF PHYSICAL REVIEW COUNCIL	DATE
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SECTION VIII – ACTION OF THE JUDGE ADVOCATE GENERAL

THE PROCEEDINGS ARE IN ACCEPTED FORM AND ARE TECHNICALLY CORRECT	YES	NO
THE FINDINGS ARE SUPPORTED BY THE EVIDENCE OF RECORD	YES	NO
THE RECOMMENDED DISPOSITION IS SUPPORTED BY THE EVIDENCE OF RECORD	YES	NO
ADDITIONAL COMMENTS ARE ATTACHED	YES	NO

SIGNATURE OF JUDGE ADVOCATE GENERAL (OR DESIGNEE)	DATE
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SECTION IX – ACTION OF THE FINAL APPROVING AUTHORITY (FOR THE COMMANDANT)

FINAL ACTION: The findings and recommendations of the Physical Disability Evaluation Board are approved.

SIGNATURE AND TITLE OF THE FINAL APPROVING AUTHORITY (FOR THE COMMANDANT)	DATE
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PRIVACY ACT STATEMENT

Authority: 45 CFR 164.520 and DoD 6025.18-R.
Purpose: To provide USCG active duty or reserve member with the findings and recommended disposition of the Physical Disability Evaluation System (PDES).
Routine Uses: Authorized USCG personnel will use this information for physical disability evaluation determinations. Any external discloses of this data will be in accordance with DHS/USCG-010, Physical Disability Evaluation System Files, 73 Federal Register (FR) 77768, December 19, 2008.
Disclosure: Voluntary.