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| Your Directorate or Office United States Coast Guard | Street  City, ST ZIP  Staff Symbol:  Phone:  Fax:  Email:    1000  DDMMMYY |

**MEMORANDUM**

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| From: | F. M. Last, RANK  CG UNIT |  |  |
| To: | PY24 RCM Designation Board | | |
| Thru: | Your CO | | |
| Subj: | RCM DESIGNATION APPLICATION NARRATIVE | | |

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| Ref: | 1. ALCGPSC XXX/21 |

1. In your own words, define what an RCM does:

2. Given your definition, state why you want to be an RCM and why you would be successful:

3. Discuss any short or long-term goals you have as an RCM, if selected:

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