DAC MEMBERSHIP

Employee NAME:
JOB TITLE:
JOB SERIES:
CAREER FIELD:
SUBJECT: Request for Membership in the Defense Acquisition Corps

1. Recommend: ____ Return: _____

Supervisor:

_____ _____

SIGNATURE DATE

2. Recommend: ____ Return: _____

Chief Contracting Officer:

_____ _____

SIGNATURE DATE

3. Recommend: ____ Return: _____

Head Contracting Officer:

_____ _____

SIGNATURE DATE