



# HQDA Form 5

**BLUF**: The Form 5 can be a stand alone document.

- Block 7, KEY POINTS – Put the BLUF here. Use the Discussion area to summarize or amplify the KEY POINTS
- If an EXSUM is requested place it in the Discussion
- If you can answer the question in the space available, **Do Not** prepare an additional paper
- If more space is needed, prepare an Information or Discussion Paper – Use the Discussion area to show highlights only

( CLASSIFICATION )

ARMY STAFFING FORM <small>For use of this form, see DA Memo 25-52; the proponent agency is AASA.</small>			1. TRACKING NUMBER	2. TODAY'S DATE (YYYYMMDD)	3. SUSPENSE DATE (YYYYMMDD)
4. OFFICE SYMBOL (Office Symbol here)			5. SUBJECT (Place the HQDA Control Sheet Subject line here)		
6. ROUTING: (ECC USE ONLY) Initial Date			ECC POC _____ (Rank, Name, Phone) DIR, ECC _____		
SA			COMMENTS:  <b>(Senior Leadership of Department of Army Comments Only!!!)</b>		
CSA					
USA					
VCSA					
AASA					
DAS					
SMA					
DUSA					
VDAS					
7. EXECUTIVE SUMMARY / ACTION MEMORANDUM					
Key Points					
<div style="display: flex; justify-content: space-between;"> <div style="background-color: #800000; color: white; padding: 10px; border: 1px solid white;"> <p style="margin: 0;">• <b>Maximum one sentence or two lines per bullet</b></p> </div> <div style="background-color: yellow; padding: 10px; border: 1px solid black;"> <p style="margin: 0;">Place the most important points to the Senior Leaders here!</p> </div> </div>					
Ref: Provide the details that triggered this ACTION (Origin, tasker, message, correspondence, or meeting)					
Encl: TAB A: The document to be signed or the 1st piece of supporting documentation. TAB B: The next piece of supporting documentation and continue the tabs as needed.					
1. Purpose: Provide a brief statement to the EOH relating to this ACTION (Recommendation or Information)					
2. Discussion:					
<p>a. <b>Summarize or amplify</b> the information provided in the Key Points above. If a paper is presented at Tab A, describe the details or highlights. Briefly state that so the EOH can move directly to the paper. Provide current status of issue (if applicable).</p> <p>b. This discussion should use the HQDA Executive Writing Standards. If you are presenting an EXSUM, it goes here. If you can convey the information in the space provided, put it all on the FORM 5. If you need more space prepare a one page Action/Info Memorandum or an Info/Discussion Paper and provide it under Tab A. <u>There is no extension page for the FORM 5.</u></p> <p>c. This discussion should tell the "story" of an action without "begging questions." The final authority should fully understand why this action is necessary. Notwithstanding, action officers should make every attempt to limit all information to one page.</p>					
3. Recommendation: If for Information say, "Information Only". If a decision is required, Identify the member of the EOH to whom you are making the recommendation for approval or disapproval.					
APPROVED _____ DISAPPROVED _____ NOTED _____ SEE ME _____ COMMENT _____					

HQDA FORM 5, JUN 2006

Current Version is Oct 2007

( CLASSIFICATION )

Previous editions are obsolete. Page 1 of 3  
APD V1.00



# HQDA Form 5, Page 2

## Page 2

- Recommendation for Staff Principal: Action Officer communication with their Staff Principal.

### Coordination Keys –

- Handwriting is okay, but it must be legible
- Incomplete coordination will result in a returned action

**Format is available in PureEdge**

( CLASSIFICATION )

8. LEAD AGENCY STAFF COORDINATION				TRACKING NUMBER:		
TITLE	INITIAL	TYPE OR PRINT NAME			DATE (YYYYMMDD)	
Branch		Branch Chief, LTC/GS-14				
Division		Division Chief, COL/GS-15				
Director		The Director, BG/SES				
Deputy		The Deputy, MG/SES				
PRINCIPAL		GO Principal, LTG/SES				
ACTION OFFICER (Name/Title/Phone Number/E-mail)		Action Officer/MAJ/555-1212/action.officer@hqda.army.mil				
FILE LOCATION: G:HQDA Action Officer Training Course/Class Forms/HQDA FORM 5.doc						
SACO's NAME (Name/Title/Phone Number/E-mail)		HQDA SACO/SACO/555-2222/hqdasaco@hqda.army.mil				
RECOMMENDATION FOR STAFF PRINCIPAL: <b>This block allows for recommendations to the Staff Principal (IE: G-3/5/7 Approves the memorandum at TAB A by initialing Block 8).</b>						
9. STAFF COORDINATION						
CONCUR	NON-CONCUR	AGENCY	NAME (TITLE, LAST NAME)	PHONE	DATE (YYYYMMDD)	REMARKS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Office	LTC Action Officer	555-0505		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Office	MAJ Action Officer	555-0404		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Office	CPT Action Officer	555-0303		
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
10. REMARKS BY ECC: <input type="checkbox"/> RETURNED REQUESTING ADDITIONAL INFORMATION/CLARIFICATION						
ECC Comments Only!!!						

HQDA FORM 5, JUN 2006  
**Current Version is Oct 2007**

( CLASSIFICATION )