Army Ideas for Excellence Program (AIEP) Proposal

1. Suggester Information
   a. NAME OF SUGGESTER (Last, First, MI)     b. SSN     c. GRADE
   d. POSITION     e. TITLE
   f. INSTALLATION OR ACTIVITY (Complete office address)  g. OFFICE TELEPHONE (AV and Commercial)
   h. HOME ADDRESS (If you prefer to have communications on the suggestion sent to that address)
   i. SUGGESTER’S STATUS
      - Direct Hire Civilian
      - Indirect-Hire Local National
      - Other (Specify)

2. I, the suggester, acknowledge the following:
   a. SIGNATURE OF SUGGESTER
   b. DATE

3. Suggestion Information
   a. SUBJECT OF SUGGESTION
   b. PRESCRIBING DIRECTIVE AND DATE (If applicable)
   c. SUGGESTION NO.
   d. DESCRIBE CURRENT PROCEDURE (If more space is needed, continue on a separate sheet.)
   e. DESCRIBE PROPOSED PROCEDURE
   f. BENEFITS IF ADOPTED

4. Program Coordinator Acknowledgment
   Thank you for your suggestion. It has been assigned a number (shown in block 5c above). Your suggestion will be given careful consideration and you will be kept advised as to action taken.
   a. SIGNATURE     b. DATE

DA FORM 1045, AUG 1990
Data Required by the Privacy Act of 1974

Authority: 10 USC 1124 and 5 USC 4502.

Principal Purposes: (a) In processing payment of cash awards to personnel, the Social Security Number (SSN) is used by the Finance and Accounting Office (F&AO) for reporting withholding tax to the Internal Revenue Service, and

(b) Either office address or home address is required so that the suggester may be advised of the suggestion and results of action taken.

Routine Uses: The SSN is used for identification of pay and personnel records, and forwarding address for military personnel. The home address is used to notify employees of actions pertaining to suggestions.

Disclosure: Disclosure of the SSN and other personal information is voluntary. However, failure to provide the SSN may result in delay of payment of a cash suggestion award. Failure to provide the home address would result in acknowledgment and evaluation reports being sent to the individual’s employing office.

INSTRUCTIONS FOR COMPLETION AND PROCESSING

1. Suggester:
   a. Complete all items except block 3c and 4.
   b. Submit original copy to the Program Coordinator, Director of Resource Management, who will assign a number to your suggestion and return an acknowledgment of receipt to you.
   c. Retain Copy 2 for your records.

2. Program Coordinator:
   a. Complete blocks 3c and 4.
   b. Immediately acknowledge receipt to the Suggester in the address specified in item 1f OR 1h.