

## Department of Military and **Veterans Affairs**

Alaska Military Youth Academy

P.O. Box 5727 JBER, AK 99505-0727 Main: 907.428.7306 Fax: 907.428.7380

Reports should be submitted by 21st of each month

## **Mentor Monthly Post-Residential Report**

## Submit report multiple ways:

Mail:
AMYA RPM
PO Box 5727
JBER, AK 99505

In-Person: Muldoon Office

8:00am-4:00pm

(907) 428-7385

Email:

1st- richard.gamble@alaska.gov 2nd-richard.gamble@alaska.gov 3rd- richard.gamble@alaska.gov

Facebook: 1st- Amya MrGamble

2nd- Amya MrGamble 3rd- Amya MrGamble

Phone:

1st- Gamble (907) 428-7339 2nd-Gamble (907) 428-7339 3rd-Gamble (907) 428-7339

Mentor Name:		Date:	
Cadet Name:			Platoon #
EDUCATION:		Where:	
Start Date:	es No Where: Wares: Wares: Waregiving/Subsistence of	age: or other productive activity? □	
MILITARY SERVICE: Cur Which Branch: Basic Training Date:			O (Continue to Other)
OTHER PLACEMENTS (	reatment, Detention, J	ail, or Other placement than t	hose listed above):
Have you and your Cad Are there any changes	•	his month?	lo
MENTOR CONTACTS: Record below, the num	nber and any type of co	ntact that you and your Cadet	had;
Phone Call Date(s)	Visit Date(s)	Text/Letter Date(s)	Facebook/Other contact Date(s)
Please include any chan	ges in your contact info	rmation:	
Mentor's Signature:		Date:	

Thank you for your help in recording the progress of your Cadet during the post-residential phase of the program. The information you provide on this report is reported to the National Guard Bureau in Washington DC. The future of the Challenge Program depends on the success of our graduates.