



**IDAHO AIR NATIONAL GUARD
124TH FIGHTER WING
BOISE AIR TERMINAL (GOWEN FIELD)**



MEMORANDUM FOR

FROM:

SUBJECT: MAXIFLEX REQUEST LETTER

1. Request that the undersigned be authorized Maxiflex schedule.

2. Justification:

3. Contact Information:

Name:

DSN:

Comm:

Email:

4. I acknowledge that the Maxiflex schedule is only valid for one year and needs to be renewed annual at the start of each calendar year (January).

cc:

HRO - Supervisory Human Resource Specialist