

NOTIFICATION AND AWARD OF EXTRA MILITARY
INSTRUCTION (EMI)

From: _____

To: _____

Via: Chief Master-at-Arms, Naval Hospital Lemoore

1. You have been assigned _____ days of EMI to begin on _____ and to terminate on _____.

2. Your EMI will be performed from _____ to _____ hours daily except Sundays and Holidays.

3. You will muster with _____
15 minutes prior to the above assigned time.

4. If you fail to muster at the time prescribed, disciplinary action will be taken.

ACKNOWLEDGEMENT BY MEMBER

I understand the above order and the procedures for performing EMI. I further understand that if I fail to comply with any of the above orders, I will be subject to having disciplinary actions taken against me.

Chief Master-at-Arms

EMI Member Signature/Date

Approving Authority

