



Wingman Intervention Award

Submission Form

Installation: Robins AFB

Wingman's Name:

First Sergeant/Unit:

Date of Intervention (month/year):

Duty Status at the Time of Intervention (specify ON or OFF duty):

Description:

Outcome:

Resources Utilized:

Additional Information/Comments:

Submitted By (Director/CC/Assigned First Sgts or CRC):

Approved by (Integrated Resilience):

Date Received:

NOTE: Do **NOT** include potentially identifiable information for the person assisted. Submit completed form to the Prevention Coordinator, Mr. Greg Purvis Gregory.purvis.1@us.af.mil DSN: 472-8786 OR send to the Integrated Resilience Office workflow at 78ABW.rafb.ippw@us.af.mil.