

This is the format to have the CFL access transferred. It must be on command letterhead and signed by the CO. **The certificate of completion for the 5-day CFL certification course** must be enclosed or the date scheduled for training annotated. It can be faxed to 901-874-2054 (DSN 882) or e-mailed to prims@navy.mil.

6100

Date

From: Command Name
To: Director, Physical Readiness and Community Support (N135)
Subj: CFL DESIGNATION TRANSFER LETTER

Encl: **(1) 5-Day CFL Certification Course Completion Certificate**

1. The following service member is designated as this command's Command Fitness Leader (CFL) as of date _____. Please transfer the access from _____, last four of SSN, who has the current CFL access in PRIMS, to _____, as designated below.

COMMAND INFORMATION:

COMMAND NAME:
UIC:
ADDRESS:
PHONE NUMBERS (Commercial and DSN):

CFL INFORMATION:

NAME:
SSN (last 4):
PRD:
RANK/RATE:
E-MAIL ADDRESS:
PHONE NUMBERS (Commercial and DSN):
UICs RESPONSIBLE FOR:

2. If there are any questions, please contact _____.

COMMANDING OFFICER