



U.S. ARMY

DA Form 1059-1



DA Form 1059-1 The New AER

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What Does the NEW AER Do For Me?



This is the first all comprehensive update to the AER system in over 50 years.

Benefits of the Enhanced AER Include:

- Electronic preparation and submission in Evaluation Entry System (EES)
- Increase accuracy during the preparation of reports.
- Bulk preparation and submission.
- HQDA's ability to examine reports prior to submission to the students' AMHRR.
- Decreased submission and processing timelines.
- Accountability of AERs; once in EES reports will not get 'lost in the mail'.
- Direct system interface between EES and ATRRS.
- Incorporates data mining tools to assist HQDA with talent management.
- Managed "Overall Academic Achievement" box check system.
- Academic achievement measures are specific to the form used; no longer uniform for all.
- Transparency for both academic rating officials and students throughout the process.

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Common Pitfalls



Every field **MUST** be filled out except:

- If no GPA for program leave Part (II) Section (d) blank
- If an initial or interim report leave Part (III) Section (a) blank

If a section cannot be rated, include a comment as to why:

- No written communication required for program
- No oral presentations required for program
- No research required for program

You **MUST** have a DTMS entered PT card within the rated time or relevant profile. You **CANNOT** leave this section blank.

Part (III) Section (i) "Special Project(s) or Paper(s) is one of the data mined sections. This will aid in future assignments. It **MUST** be filled out.

DOCUMENT MUST BE SIGNED IN SEQUENTIAL ORDER. CDR WILL NOT SIGN ANY AER THAT IS MISSING FIELDS.

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DA Form 1059 - 1



HQDA#:

Page 1

CIVILIAN INSTITUTION ACADEMIC EVALUATION REPORT		See Privacy Act Statement in AR 623-3.	
PART I - ADMINISTRATIVE DATA			
a. NAME (Last, First, Middle Initial)	b. DOD ID No.	c. RANK	d. BRANCH
f. COURSE TITLE		g. NAME AND LOCATION OF SCHOOL	
h. DURATION OF COURSE FROM (YYYYMMDD) THRU (YYYYMMDD)	i. COMPONENT (Status Code)	j. NO. OF ENCLOSURES	k. RATED STUDENT'S EMAIL ADDRESS (.gov or .mil)
l. REASON FOR SUBMISSION			
<input type="checkbox"/> COURSE COMPLETION	<input type="checkbox"/> INTERIM REPORT	<input type="checkbox"/> INITIAL REPORT	<input type="checkbox"/> DID NOT GRADUATE
<input type="checkbox"/> AHRC DIRECTED	<input type="checkbox"/> RELEASED EARLY (NO FAULT OF STUDENT)	PROJECTED GRADUATION DATE:	
m. REASON FOR ATTENDANCE			
INITIAL (program extending over 2 years); INTERIM (prepared 12 months from start date)			
PART II - DEMONSTRATED ABILITIES (To be completed by the Civilian Institution)			
a. DOES SOLDIER FULLY SUPPORT SHARP, EO, AND EEO: <input type="checkbox"/> Yes <input type="checkbox"/> No (comments are required)	b. APFT PASS / FAIL / PROFILE: _____ DATE: _____	c. HEIGHT: _____ WEIGHT: _____ WITHIN STANDARD?	
d. OVERALL GRADE POINT AVERAGE: _____ of _____	Comments required below, for "Failed" APFT, or "Profile" when it precludes performance of duty, and "No" for Army Weight Standards. Reset Item ID: APFT / PASS / FAIL / PROFILE		
e. Written Communication (Comment on student's written communication to include such items as written assignments, research proposals, publications submissions, and publications)			
Student's demonstrated written communication skills.			
f. Oral Communication (Comment on student's oral communication to include such items as instruction and presentations)			
Student's demonstrated oral communication skills.			
g. Research Ability (Comment on student's research abilities to include such items as performance in research/statistical coursework, research proposals statistical analysis, and grant writing)			
Student's demonstrated research ability.			
h. ACADEMIC EVALUATION (To be completed by the Civilian Institution) ATTACH AN OFFICIAL TRANSCRIPT IN DUPLICATE EVALUATION (Evaluation of Student Performance should be based on the normal standard of performance at the institution. Identify the discipline of study, degree, and any special achievements, leadership opportunities, or deficiencies noted, etc. Include aptitude for further schooling)			
Student's demonstrated achievements, deficiencies, and recommendations for future schools.			
i. SPECIAL PROJECT(S) OR PAPER(S): 1) _____ 2) _____ 3) _____			
PART III - ADMINISTRATIVE REVIEW (To be completed by the Administrative Reviewer)			
a. DID THE STUDENT SUCCESSFULLY COMPLETE THE COURSE? (A "NO" response must be supported by comments in block b. An Official Transcript must be attached prior to submission of the report to the AMHRR) <input type="checkbox"/> YES <input type="checkbox"/> NO			
b. ADMINISTRATIVE REVIEWER COMMENTS			
Completed by student and reviewed by ASD CDR or the education services officer prior to the inclusion in the rated student's AMHRR. List specific school, fellowship, dissertation, thesis topic, and scholarship program completed.			
c. RATED STUDENT HAS DEMONSTRATED APTITUDE FOR THE FOLLOWING UTILIZATION TOUR/FOLLOW-ON ASSIGNMENT(S): 1) _____ 2) _____ 3) _____			

- DA Form 1059 - 1 used for RA Soldiers participating in (1) formally approved part-time degree completion program (2) when degree completion program is their primary duty or (3) voluntary participation by RA, USAR serving in active status or ARNG serving in title 10 or 32 USC Soldiers attending night courses at civilian institution.
- Student is assessed on written and oral communication, research ability.
- Reasons for Attendance.**
 - Initial
 - Interim
 - Course Completion
 - Released Early (No Fault of Student)
 - Did Not Graduate
 - AHRC Directed
- Data mining tools to increase academic accountability and talent management include:
 - APFT and HT/WT
 - Overall GPA
 - **Special projects or papers**
- No managed "Overall Academic Achievement" box check system.



Part I - Administrative Data, DA Form 1059 – 1



HQDA#:		CIVILIAN INSTITUTION ACADEMIC EVALUATION REPORT For use of this form, see AR 623-3; the proponent agency is DCS, G-1.			<i>See Privacy Act Statement in AR 623-3.</i>	
PART I - ADMINISTRATIVE DATA						
a. NAME (Last, First, Middle Initial) Last, First MI.		b. DOD ID No. 10-digit	c. RANK	d. BRANCH	e. SPECIALTY/PMOSC	
f. COURSE TITLE			g. NAME AND LOCATION OF SCHOOL			
h. DURATION OF COURSE FROM (YYYYMMDD) THRU (YYYYMMDD)		i. COMPONENT (Status Code)	j. NO. OF ENCLOSURES	k. RATED STUDENT'S EMAIL ADDRESS (.gov or .mil) <i>Official .mil address; limited space enter info prior to the @</i>		
l. REASON FOR SUBMISSION						
<input type="checkbox"/> COURSE COMPLETION		<input type="checkbox"/> INTERIM REPORT		<input type="checkbox"/> INITIAL REPORT		<input type="checkbox"/> DID NOT GRADUATE
<input type="checkbox"/> AHRC DIRECTED		<input type="checkbox"/> RELEASED EARLY (NO FAULT OF STUDENT)		PROJECTED GRADUATION DATE: _____		
m. REASON FOR ATTENDANCE						

Duration of Course.

- From and Thru dates are determined by when the student started/ended the rated time
- Duration cannot exceed **365 days** for Initial/Interim Report and cannot exceed 455 days for Course Completion.

Reasons for Submission.

- Course Completion.** Prepared upon completion or termination of training.
- AHRC Directed.** Directed by CG, HRC
- Interim Report.** Prepared 12 months after the start date and every 12 months thereafter until course completion.
- Released Early (No Fault of Student),** para. 3-15 (f)
 - Must be explained in academic rater's narrative.
 - Part II, blocks (d-i) and Part III, blocks (a) and (c) will not be completed.
 - Explanation required in Part III, block b. (administrative review)
- Initial Report.** Prepared at the start of the program; enter projected graduation date
- Did Not Graduate.** Students that fail to meet course requirements.



Part II – Demonstrated Abilities, DA Form 1059 – 1



PART II - DEMONSTRATED ABILITIES (To be completed by the Civilian Institution)	
a. DOES SOLDIER FULLY SUPPORT SHARP, EO, AND EEO: <input type="checkbox"/> Yes <input type="checkbox"/> No (comments are required)	b. APFT PASS / FAIL / PROFILE: _____ DATE: _____
d. OVERALL GRADE POINT AVERAGE: _____ of _____	c. HEIGHT: _____ WEIGHT: _____ WITHIN STANDARD? _____ Comments required below, for "Failed" APFT, or "Profile" when it precludes performance of duty, and "No" for Army Weight Standards. Reset Item b. APFT / PASS / FAIL / PROFILE

- SHARP, EO, and EEO.**
 - Select, "No" for any substantiated violations. Part II, block a.
 - Part II, block h. will reflect *"Does not support SHARP, EO, and EEO"*.
 - Part III, block b. will reflect *"Does not support SHARP, EO and EEO"*.

- APFT.** Successful completion of the APFT is a course requirement for graduation for Soldiers attending in either a PCS or TDY status. (IAW 350-1)
 - Failed APFT requires *"Failed to meet APFT standards"* in Part II, block h.
 - PERM / TEMP profiles cleared to take an alternate event (Pass / Fail entry)
 - PERM profile that prohibits APFT, entry is left blank; academic advisor will explain reason
 - Pregnant Soldiers. *"Exempt from APFT requirement in accordance with AR 40-501."*

- HT/WT.** Comments for noncompliance go in Part II, block h., medical conditions may be cited; however, the "NO" entry is still required. ***The progress or lack of progress in a weight control program will be indicated.***
 - Noncompliance requires *"Failed to meet body composition standards"* in Part II, block I.
 - Pregnant Soldiers. *"Exempt from APFT requirement in accordance with AR 600-9."*
 - *Major Limb Loss.* *"Exempt from weight control standards of AR 600-9"*.

- GPA.** If course does not require a GPA, field will be left blank.



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Part II – Demonstrated Abilities, DA Form 1059 – 1



e. **Written Communication** (Comment on student's written communication to include such items as written assignments, research proposals, publications submissions, and publications)

Student's demonstrated written communication skills.

f. **Oral Communication** (Comment on student's oral communication to include such items as instruction and presentations)

Student's demonstrated oral communication skills.

g. **Research Ability** (Comment on student's research abilities to include such items as performance in research/statistical coursework, research proposals statistical analysis, and grant writing)

Student's demonstrated research ability.

h. **ACADEMIC EVALUATION** (To be completed by the Civilian Institution) ATTACH AN OFFICIAL TRANSCRIPT IN DUPLICATE

EVALUATION (Evaluation of Student Performance should be based on the normal standard of performance at the institution. Identify the discipline of study, degree, and any special achievements, leadership opportunities, or deficiencies noted, etc. Include aptitude for further schooling)

Student's demonstrated achievements, deficiencies, and recommendations for future schools.
Please be detailed. This section will be reviewed for promotions

i. **SPECIAL PROJECT(S) OR PAPER(S):**

- 1) List project(s), dissertation, thesis topic, or paper(s) successfully completed that may have potential value to the
- 2) Army.
- 3)

THIS IS GOING TO BE DATA MINED! MAKE SURE YOU FILL IT OUT COMPLETELY!!!

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Completed by student and reviewed by AMEDD Student Detachment

PART III - ADMINISTRATIVE REVIEW (To be completed by the Administrative Reviewer)		
a. DID THE STUDENT SUCCESSFULLY COMPLETE THE COURSE? (A "NO" response must be supported by comments in block b. An Official Transcript must be attached prior to submission of the report to the AMHRR) <input type="checkbox"/> YES <input type="checkbox"/> NO		
b. ADMINISTRATIVE REVIEWER COMMENTS		
List specific school, fellowship, dissertation, thesis topic, and scholarship program completed. Please make this a narrative no more than 8 lines that is similar to what a senior rater would write on the OER. Highlighting academic accomplishments.		
c. RATED STUDENT HAS DEMONSTRATED APITUDE FOR THE FOLLOWING UTILIZATION TOUR/FOLLOW-ON ASSIGNMENT(S):		
1) Utilization Tour	2) Utilization Tour	3)

DA FORM 1059-1, MAR 2019 PREVIOUS EDITIONS ARE OBSOLETE. APD LC v1.00ES Page 1 of 3

- Comments required for a student's release from a degree program (approved retirement, resignation from Army service or through no fault of their own).
- Official transcripts must be attached prior to submission.
- List 3 Follow on assignments for CDR approval

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Part IV – Authentication, DA Form 1059 – 1



HQDA#: _____

PART IV - AUTHENTICATION		
a1. NAME OF ACADEMIC ADVISOR (<i>Last, First, Middle Initial</i>)	a2. TITLE	a3. TELEPHONE NUMBER
a4. ACADEMIC ADVISOR'S EMAIL ADDRESS	a5. ACADEMIC ADVISOR'S SIGNATURE	a6. DATE (YYYYMMDD)
b1. NAME OF ADMINISTRATIVE REVIEWER (<i>Last, First, Middle Initial</i>)	b2. TITLE	b3. TELEPHONE NUMBER
b4. ADMINISTRATIVE REVIEWER'S ORGANIZATION		
b5. ADMINISTRATIVE REVIEWER'S EMAIL ADDRESS (<i>.gov or .mil</i>)	b6. ADMINISTRATIVE REVIEWER'S SIGNATURE	b7. DATE (YYYYMMDD)
c1. THIS IS A REFERRED REPORT, DO YOU WISH TO MAKE COMMENTS? <input type="checkbox"/> Referred <input type="checkbox"/> Yes, comments are attached. <input type="checkbox"/> No	d1. RATED STUDENT'S SIGNATURE	d2. DATE (YYYYMMDD)
c2. RATED STUDENT'S COMMENTS (<i>Referred Report Only</i>)		

- DA Form 1059-1 can be signed and dated up to 14 days prior to the “THRU” date to provide the rated student an opportunity to sign prior to school departure.
- Failure to obtain the rated student’s signature will include *“The rated student was unavailable for signature”* or *“The rated student refused to sign”* in Part III, block b.
 - Missing signatures due to limited CAC access will not be processed.
- The report CANNOT be submitted by ASD to EES prior to the “THRU” date.
- Proper signature sequence is: Academic Advisor, Administrative Reviewer, Rated Student.
- If referred, the rated student will select whether they wish to make comments.
 - Comments by the rated student for referred reports are made in Part IV, block c2. or as a one page enclosure, not both.



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Signing without CAC



How To Electronically Sign Without CAC Access


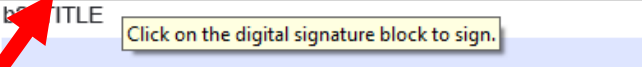


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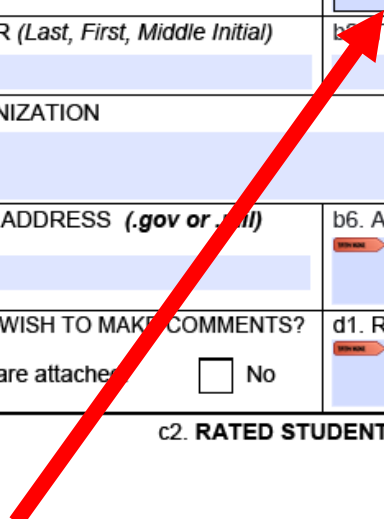
Signing without CAC



PART IV - AUTHENTICATION

a1. NAME OF ACADEMIC ADVISOR (<i>Last, First, Middle Initial</i>) PANTS, SMARTY, A	a2. TITLE Dean of AER University	a3. TELEPHONE NUMBER 210-555-5555
a4. ACADEMIC ADVISOR'S EMAIL ADDRESS smarty.pants@aer.edu	a5. ACADEMIC ADVISOR'S SIGNATURE 	a6. DATE (YYYYMMDD)
b1. NAME OF ADMINISTRATIVE REVIEWER (<i>Last, First, Middle Initial</i>)	b2. TITLE 	b3. TELEPHONE NUMBER
b4. ADMINISTRATIVE REVIEWER'S ORGANIZATION		
b5. ADMINISTRATIVE REVIEWER'S EMAIL ADDRESS (<i>.gov or .mil</i>)	b6. ADMINISTRATIVE REVIEWER'S SIGNATURE 	b7. DATE (YYYYMMDD)
c1. THIS IS A REFERRED REPORT, DO YOU WISH TO MAKE COMMENTS? <input type="checkbox"/> Referred <input type="checkbox"/> Yes, comments are attached <input type="checkbox"/> No	d1. RATED STUDENT'S SIGNATURE 	d2. DATE (YYYYMMDD)
c2. RATED STUDENT'S COMMENTS (<i>Referred Report Only</i>)		

Click on the digital signature block to sign.



Click on the box like you would if you had CAC access

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HQDA#: _____

PART IV - AUTHENTICATION

a1. NAME OF ACADEMIC ADVISOR <i>(Last, First, Middle Initial)</i> PANTS, SMARTY, A	a2. TITLE Dean of AER University	a3. TELEPHONE NUMBER 210-555-5555
a4. ACADEMIC ADVISOR'S EMAIL ADDRESS smarty.pants@aer.edu	a5. ACADEMIC ADVISOR'S SIGNATURE	a6. DATE (YYYYMMDD)
b1. NAME OF ADMINISTRATIVE REVIEWER <i>(Last, First, Middle Initial)</i>		b3. TELEPHONE NUMBER
b4. ADMINISTRATIVE REVIEWER'S ORGANIZATION		
b5. ADMINISTRATIVE REVIEWER'S EMAIL ADDRESS		b7. DATE (YYYYMMDD)
c1. THIS IS A REFERRED REPORT, DO YOU WISH TO MAKE COMMENTS? <input type="checkbox"/> Referred <input type="checkbox"/> Yes, comments are attached. <input type="checkbox"/> No	d1. RATED STUDENT'S SIGNATURE	d2. DATE (YYYYMMDD)

Warning: JavaScript Window - Electronic Signature Notice



Your digital signature has the same legal effect and consequences as a hand written signature.

The individual who signs this digital signature, has the sole authority to clear or delete this digital signature.

OK

Same legal effect as your CAC or written signature

Click OK

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c2. RATED STUDENT'S COMMENTS *(Referred Report Only)*



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Tools AER 1059-1 SNUFF... x

HQUA#:

a1. NAME OF ACADEMIC ADVISOR
PANTS, SMARTY, A

a4. ACADEMIC ADVISOR'S EMAIL
smarty.pants@aer.edu

b1. NAME OF ADMINISTRATIVE REVIEWER

b4. ADMINISTRATIVE REVIEWER'S NAME

b5. ADMINISTRATIVE REVIEWER'S EMAIL

c1. THIS IS A REFERRED REPORT, I.e. I am referring this report to the appropriate authority for review.
 Referred Yes, continue

TELEPHONE NUMBER
55-5555
TE (YYYYMMDD)
20190813
TELEPHONE NUMBER
TE (YYYYMMDD)
TE (YYYYMMDD)

Sign with a Digital ID

Choose the Digital ID that you want to use for signing:

[Redacted] [View Details](#) [Refresh](#)

[Redacted] [View Details](#)

[Configure New Digital ID](#) [Cancel](#) [Continue](#)

Click "Configure New Digital ID"

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Configure a Digital ID for signing

A Digital ID is required to create a digital signature. The most secure Digital ID are issued by trusted Certificate authorities and are based on secure devices like smart card or token. Some are based on files.

You can also create a new Digital ID, but they provide a low level of identity assurance.

Select the type of Digital ID:

- Use a Signature Creation Device
Configure a smart card or token connected to your computer
- Use a Digital ID from a file
Import an existing Digital ID that you have obtained as a file
- Create a new Digital ID**
Create your self-signed Digital ID

Cancel Continue

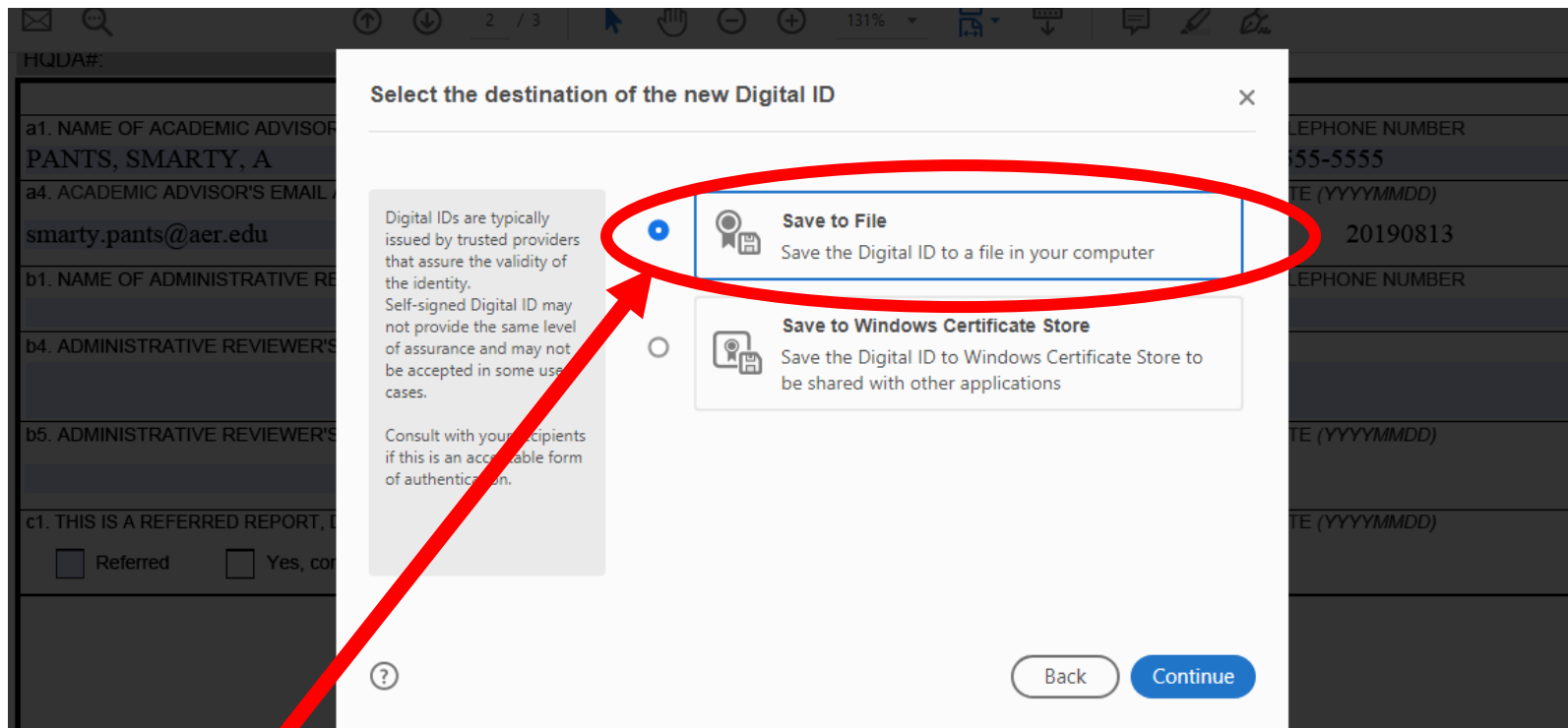
Click "Create a new Digital ID" and Continue

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Click "Save to File" and then Continue

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2 / 3 131%

HQUA#:

a1. NAME OF ACADEMIC ADVISOR
PANTS, SMARTY, A

a4. ACADEMIC ADVISOR'S EMAIL
smarty.pants@aer.edu

b1. NAME OF ADMINISTRATIVE REVIEWER

b4. ADMINISTRATIVE REVIEWER'S

b5. ADMINISTRATIVE REVIEWER'S

c1. THIS IS A REFERRED REPORT, I

Referred Yes, con

Create a self-signed Digital ID

Enter the identity information to be used for creating the self-signed Digital ID.

Digital IDs that are self-signed by individuals do not provide the assurance that the identity information is valid. For this reason they may not be accepted in some use cases.

Name: Smarty A. Pants

Organizational Unit: AER University

Organization Name: AER University

Email Address: smarty.pants@aer.edu

Country/Region: US - UNITED STATES

Key Algorithm: 2048-bit RSA

Use Digital ID for: Digital Signatures

[?](#) [Back](#) [Continue](#)

TELEPHONE NUMBER
55-5555

TE (YYYYMMDD)
20190813

TELEPHONE NUMBER

TE (YYYYMMDD)

TE (YYYYMMDD)

Name and Email address are required fields

Once filled out, click Continue

This is a completely digital system. NO HAND WRITTEN or SCANNED DOCUMENTS ALLOWED



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Save the self-signed Digital ID to a file [X]

Add a password to protect the private key of the Digital ID. You will need this password again to use the Digital ID for signing.

Your Digital ID will be saved at the following location :

C:\Users\smarty.a.pants\AppData\Roaming\Adobe\Acro [Browse]

Apply a password to protect the Digital ID:

..... [Green bar]

Confirm the password:

.....|

[?] [Back] [Save]

Create a password/PIN for verifying your signature and Click Save

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59-1 SNUFFY, JOE A..pdf (SECURED) - Adobe Acrobat Pro DC

View Window Help

Tools

AER 1059-1 SNUFF...

2 / 3 131%

HQDA#

a1. NAME OF ACADEMIC ADVISOR
PANTS, SMARTY, A

a4. ACADEMIC ADVISOR'S EMAIL

b4. ADMINISTRATIVE REVIEWER'S


b5. ADMINISTRATIVE REVIEWER'S


c1. THIS IS A REFERRED REPORT. [] Referred [] Yes, con


LEPHONE NUMBER
55-5555
TE (YYYYMMDD)
20190813
LEPHONE NUMBER
TE (YYYYMMDD)
TE (YYYYMMDD)

Sign with a Digital ID

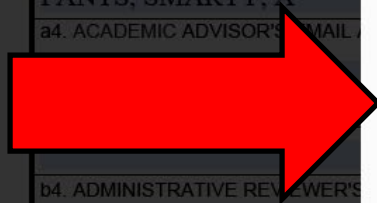
Choose the Digital ID that you want to use for signing:

 **Smarty A. Pants** (Digital ID file)
Issued by: Smarty A. Pants, Expires: 2024.08.13 [View Details](#)

 [REDACTED] [View Details](#)

 [REDACTED] [View Details](#)

[Refresh](#) [Continue](#) [Cancel](#) [Configure New Digital ID](#)



Select newly create signature and Click "Continue"

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Signing without CAC



Sign as "Smarty A. Pants"

Appearance Standard Text Create

Smarty A. Pants Digitally signed by Smarty A. Pants Date: 2019.08.13 15:12:39 -05'00'

View Certificate Details

Review document content that may affect signing Review

Enter the Digital ID PIN or Password...

Back Sign

Enter your password/PIN to sign and Click Sign

This is a completely digital system. NO HAND WRITTEN or SCANNED DOCUMENTS ALLOWED



Signing without CAC



AER 1059-1 SNUFFY, JOE A. (1).pdf (SECURED) - Adobe Acrobat Pro DC

File Edit View Window Help

Home Tools AER 1059-1 SNUFF... x

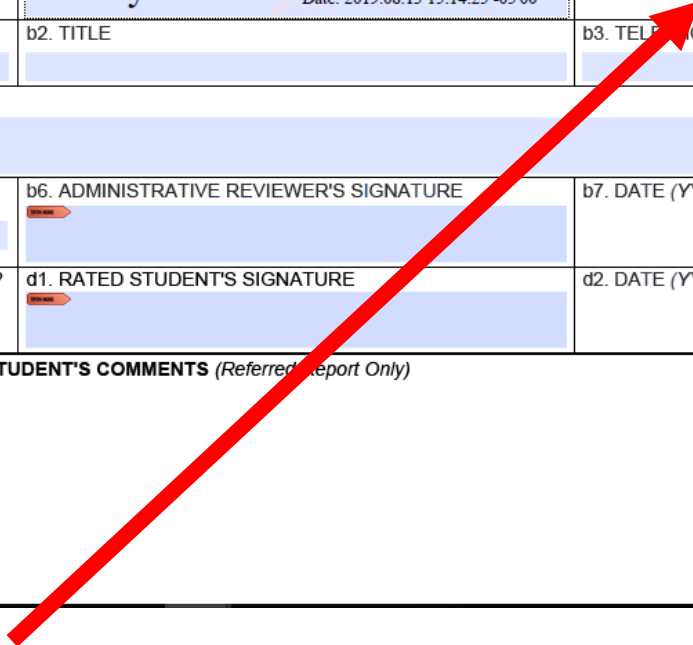
2 / 3

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HQDA#:

PART IV - AUTHENTICATION

a1. NAME OF ACADEMIC ADVISOR <i>(Last, First, Middle Initial)</i> PANTS, SMARTY, A	a2. TITLE Dean of AER University	a3. TELEPHONE NUMBER 210-555-5555
a4. ACADEMIC ADVISOR'S EMAIL ADDRESS smarty.pants@aer.edu	a5. ACADEMIC ADVISOR'S SIGNATURE Smarty A. Pants <small>Digitally signed by Smarty A. Pants Date: 2019.08.13 15:14:25 -05'00'</small>	a6. DATE (YYYYMMDD) 20190813
b1. NAME OF ADMINISTRATIVE REVIEWER <i>(Last, First, Middle Initial)</i>	b2. TITLE	b3. TELEPHONE NUMBER
b4. ADMINISTRATIVE REVIEWER'S ORGANIZATION		
b5. ADMINISTRATIVE REVIEWER'S EMAIL ADDRESS <i>(.gov or .mil)</i>	b6. ADMINISTRATIVE REVIEWER'S SIGNATURE	b7. DATE (YYYYMMDD)
c1. THIS IS A REFERRED REPORT, DO YOU WISH TO MAKE COMMENTS? <input type="checkbox"/> Referred <input type="checkbox"/> Yes, comments are attached. <input type="checkbox"/> No	d1. RATED STUDENT'S SIGNATURE	d2. DATE (YYYYMMDD)
c2. RATED STUDENT'S COMMENTS <i>(Referred Report Only)</i>		



The date will auto populate after signing

Once signed, changes cannot be made



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Read This



PLEASE NOTE



This is a completely digital system. NO HAND WRITTEN or SCANNED DOCUMENTS ALLOWED

WE WILL NOT PROCESS ANY FORMS THAT DO NOT HAVE ALL DIGITAL CERTIFIED SIGNATURES.
