

JBSA Best Practice Submission Form



Title of Joint Base Best Practice:

Submitted By:

Date:

Phone #:

Email:

Unit/ Organization:

Brief Description of the Best Practice:

Instructions: Complete as many information blocks as you can. Required areas are marked with an asterisk *. If more space is needed, attach additional sheets.

1. Functional Area* (from Cost & Performance Visibility Framework - CPVF):	
2. Is there a JB-COLS	(YES or NO)
3. a. Current Practice*:	
b. Required by:	
1) AFI title	
2) Other (list)	
4. Suggested Practice*:	
5. Relevant Directives:	(Fill in all that apply)
a. DoD Instruction reference	
b. Air Force reference	
c. Navy Instruction reference	
d. Army Instruction reference	
e. Other reference:	
6. Problems w/current practice* (Inefficient, wasteful, cost, labor, etc)	
7. Benefit of proposed process* (Efficiency in labor, cost savings, etc.)	
8. If possible, quantify any savings or efficiency in cost, labor, time or quality of service, old v. new (e.g. old required 3 labor hours while new 2 labor hours or old costs \$100/operation while new costs \$80)	

SUBMIT FORM TO: usaf.jbsa.502-abw.mbx.c3-submission-hub@mail.mil