



# Concerning PCS orders

**Any questions or concerns about your  
PCS orders,  
please go through your S-1.  
Not Reassignments.**

**Thank you!**





# Concerning PCS orders

# STOP!!!

It is mandatory to fill out the DA Form 4787 if you are taking family members OCONUS. Upon completion of this form with all signatures, please return to the Family Travel Section,

Reassignments located at:

BLDG 1 Pershing Road, Ft. Bliss, TX 79916

**Thank you!**





U.S. ARMY



# TOTAL ARMY SPONSORSHIP PROGRAM (TASP)



# Reassignment Briefing

References:

- AR 600-8-8 (The Total Army Sponsorship Program)

## Total Army Sponsorship Program (TASP)

### ✓ TASP:

- To obtain a signature/stamp from the Installation Sponsorship Liaison on your PAC Slip *prior* to picking up your clearing papers, you must bring a copy of the 5434 to your BDE level Sponsorship coordinator. They will be located at the S1.
- Soldiers in the rank of PVT-SSG, WO1-CW2, and 2LT-CPT are required to participate in the Sponsorship program, except those on assignment to a PCS length school (more than 20 weeks); bring a copy of your orders to obtain a signature.
- . An assigned sponsor or an approved exception to policy is required to out-process.
- Soldiers in the rank of SFC - CSM, CW3 - CW5, & MAJ - COL may opt-in to participate in the program if they wish to request sponsorship.
- Senior Commanders may determine that Sponsorship is required for all incoming Soldiers within their area of responsibility.
- Upon receiving Assignment Instructions, the Soldier must login to the Army Career Tracker (ACT) website at: <https://actnow.army.mil>.
  - Click on the Sponsorship tab and then DA Form 5434 (Sponsorship Program Counseling and Information Sheet). Select “Create new form” and complete sections 1, 2, 4 and 5.
  - Once each section is complete, a check mark will appear. When all sections are complete, select the “submit” button on the bottom of the page.
- Once a sponsor is assigned by the gaining unit, the Sponsor can then log into ACT and complete the DA Form 5434, section 3. The DA Form 5434 can be completed by the Soldier/sponsor simultaneously, you **MUST** bring a copy of your Personnel Action Requests (PAR), Exception to Policy to obtain a signature.

*For additional assistance, please contact us at:*

[usarmy.bliss.imcom-central.mbx.total-army-sponsorship-program@mail.mil](mailto:usarmy.bliss.imcom-central.mbx.total-army-sponsorship-program@mail.mil)





U.S. ARMY



# REASSIGNMENTS



## Reassignment Briefing

### **Reassignment Process**

Reassignment notification and briefing are required for assignment transmission for officers and enlisted.

Soldier suspense for the return of necessary documents and information to the reassignments' processing center is 30 days after reassignment briefing.

The goal for PCS orders issuance is 120 days or more prior to report date (14 days for IET Soldiers), and no later than 10 days after the receipt of required documents and information.

Army Community Service Overseas Orientation Briefing required within 30 days of assignment transmission for Soldiers on assignment to OCONUS; may be conducted in conjunction with reassignment briefing. See AR 608-1, Chapter 4.

The reassignments processing center will inform the Battalion S1 of Soldiers who fail to attend reassignment and overseas orientation briefings.

NATO Travel Orders. NATO travel orders are required for U.S. Military travel to or through Belgium, Canada, Denmark, France, Germany, Greece, Iceland, Italy, Luxembourg, the Netherlands, Norway, Portugal, Turkey, or the United Kingdom.





# Reassignment Briefing

## ***Tour Election***

- ✓ Tour Election for Overseas (OCONUS) Assignments
  - Soldiers on assignment to an overseas duty station must elect either an “all others (unaccompanied)” tour or a “with dependents (accompanied)” tour\*.
    - Complete DA Form 5121, Overseas Tour Election Statement.
    - Read each statement on the form carefully before making the decision.

If I elect to serve the "all others" tour, I understand that Government transportation of my family members to or from my overseas duty station will not be authorized during the tour. I also understand that if my family members travel at their own expense to reside at or near the area of my assignment (*except for a visit for a period not exceeding 3 continuous months*), I will no longer be entitled to Family Separation Allowance. I also understand that under this tour election, I am authorized movement of my family members to a designated location at Government expense. However, after my family members make a move to a designated location at Government expense, I cannot request to change my tour to the "with dependents" tour in order to request movement of my family members to my overseas area unless extreme personal problems arise which are fully documented.

AND

If I elect to serve the "with dependents" tour, I understand I am not authorized to move my family members and/or household goods to a designated location in CONUS. I understand that I must apply promptly for concurrent travel of my family members in order to receive Family Separation Allowance in the event concurrent travel is not approved. I understand that, if concurrent/deferred travel is not approved, I may apply for nonconcurrent travel for my family members after I arrive in my overseas area, if I am able to obtain suitable quarters, or I may elect to have my family members remain in CONUS. I understand I must have sufficient remaining service to complete the "with dependents" tour length requirements upon my arrival in the overseas area. If not, I will be required to serve an "all others" tour and will not be entitled to Government transportation of my family members to my overseas duty station.

\*Officers and career enlisted with no dependents who are not married to another Service-member and are assigned to long-tour areas overseas will serve the accompanied tour. First-term Soldiers with no dependents who are not married to another service-member on assignment to 36-month accompanied tour locations in Germany, Italy, Belgium, or Japan will serve the 36-month accompanied tour.





# Reassignment Briefing

## Service Remaining Requirement (SRR)

- ✓ Soldiers may not depart their current permanent duty station (PDS) unless they have the required SRR, unless PCS orders indicate the SRR has been waived.
  - CONUS to CONUS moves require 24 months' SRR.
  - OCONUS to CONUS moves require 12 months' SRR when returning from accompanied areas, and 6 months' SRR when returning from dependent-restricted areas. At 6 months prior to Date Eligible to Return from Overseas (DEROS), OCONUS Soldiers who do not meet the SRR to return to CONUS will have their DEROS adjusted to 2 days prior to their ETS.
  - CONUS to OCONUS or OCONUS to OCONUS moves require the Soldier to meet the prescribed tour, whether it is accompanied or unaccompanied.
  - Assignments to certain locations/duties may have a different SRR. For example, assignment to recruiting duty require 36 months' SRR from CONUS and 42 months' SRR from OCONUS.







# Reassignment Briefing

## **Service Remaining Requirement (SRR)**

- ✓ Soldiers with sufficient service remaining to complete the prescribed tour or serve the unaccompanied tour will comply with the assignment.
- ✓ Soldiers who must acquire additional time in service in order to comply with assignment instructions must either extend or reenlist, or decline to extend or reenlist, within 30 calendar days of the assignment transmittal date.
- ✓ Career Soldiers (not in NCO Career Status Program or “Indef”) who decline to extend or reenlist in order to meet the SRR must coordinate with their Career Counselor to execute a DA Form 4991 (Declination of Continued Service Statement). Signing this form has many implications, including the Soldier’s departure from service at the current ETS date.
- ✓ Initial term Soldiers who decline to extend or reenlist in order to meet the SRR will not execute a DA Form 4991; however, they must sign a statement indicating they will not extend or reenlist to meet the SRR. This statement does not prevent further reenlistment.
- ✓ Soldiers who have at least 19 years and 6 months of active Federal service upon assignment notification may elect to acquire additional service to complete the prescribed tour, retire in lieu of PCS, or execute DA Form 4991.
- ✓ Soldiers who decline to meet the SRR for assignment may still be eligible for other assignments (CONUS and OCONUS) provided they have sufficient SRR for the new assignment. For example, a Soldier who declines to extend/reenlist to meet the SRR for a 36-month assignment may be placed on assignment to a location requiring only 12 months’ SRR.





# Reassignment Briefing

## Service Remaining Requirement (SRR)

### ✓ Enlisted Airborne Assignments

- Soldiers on assignment instructions to an airborne position or unit will be utilized for at least 3 years in an airborne position/unit unless physically disqualified, exempted by general court-martial authority, separated, reassigned by DA or accepted for another airborne, airborne ranger, special forces, or other training/assignment which is considered by DA to have higher priority.
- Soldiers who have less than 3 years to ETS are still eligible for the assignment; this is not a service remaining requirement.
- Before issuing assignment orders, the Soldier must initial the airborne option statement, indicating acceptance or declination of the airborne assignment.
- If the Soldier declines the assignment, withdrawal of SQI (P) and deletion of assignment will be submitted IAW AR 614-200.





# Reassignment Briefing

## Married Army Couples Program

- ✓ Married Army couples desiring joint assignment to establish a common household or joint domicile (JD) must request such assignment by enrolling in the Married Army Couples Program (MACP).
- ✓ Soldiers who marry during or after advanced individual training (AIT) and have not proceeded to their first unit of assignment, who desire a JD with their spouse, must enroll in the MACP. When enrolled, the Soldiers will be automatically provided JD assignment consideration.
- ✓ When a Soldier enrolled in the MACP is considered for reassignment, the other Soldier is automatically considered for assignment to the same location or area, except when one Soldier is assigned to a dependent restricted location.
- ✓ Enrollment in the MACP only guarantees Joint Domicile (JD) assignment consideration; it does not guarantee that the couple will be assigned together.
- ✓ Favorable consideration for JD assignment will depend on a valid requisition in the same area for both Soldiers and is subject to the needs of the Army. JD assignments will not be considered when one Soldier is attending school in a PCS status; however, consideration will be given upon school completion.
- ✓ Assignment instructions for each Soldier will indicate whether or not a joint assignment is approved.
- ✓ Married Army couples that do not enroll in the MACP or dis-enroll from the MACP indicate that JD assignments are not desired; therefore, this cannot be used as the basis to request deletion from an assignment.





# Reassignment Briefing

## DESIGNATED PLACE MOVES

### ✓ Designated Place Moves

- Soldiers on assignment to dependent-restricted tours are authorized to move Family members to a designated place, unless participating in the HAAP.
- Soldiers who elect to serve an unaccompanied tour are authorized to move Family members to a designated place.
- Family members cannot be moved again at Government expense until subsequent PCS, or if the Soldier serves a consecutive overseas tour.
- Soldiers authorized deferred travel for Family members are not authorized to move Family members to a designated place, unless travel is expected to be delayed by 20 weeks or more (nonconcurrent travel). Family members will then be authorized to travel from the designated place to the new PDS at government expense provided the Family members are command sponsored and the Soldier has at least 12 months remaining in the OCONUS command.
- The designated place may be:
  - any location in CONUS
  - Alaska, Hawaii, Puerto Rico, or US territory/possession (losing installation commander approval)
  - The follow-on PDS (dependent-restricted and unaccompanied tours only)
  - Any OCONUS location approved by the Secretary of the Army (dependent-restricted tours only)





# Reassignment Briefing

## Human Immunodeficiency Virus (HIV) Testing

### ✓ HIV Testing Requirement

- Soldiers who receive overseas AI are required to take an HIV test as part of their Soldier reassignment processing requirements if they have not been tested in the 6 months prior to their departure.
- Date, time, and location of test will be annotated on DA Form 4036, Medical and Dental Preparation for Overseas Movement
- Those who are HIV infected will be deleted from AI.





# Reassignment Briefing

## Application Requirements for Deletions and Deferments

- ✓ Deletion and Deferment Requests should be submitted:
  - Within 30 days of assignment notification, or as soon as the determination is made that a deletion or deferment is needed. Requests submitted after 30 days will not be rejected; however, they must include an explanation of the circumstances resulting in the late submission.
  - Using a Personnel Action Requests (PAR), along with supporting documentation, through the BN S1. If the commander recommends approval, the request is forwarded through the colonel/O-6 level chain of command to HRC.
- ✓ If a disqualifying factor can be resolved within 120 days of the report month, a deferment rather than deletion should be requested.
- ✓ Soldiers will continue with the reassignment process until the action has been completed (except for requesting port call, moving Family members, shipping household goods (HHG), and terminating quarters).





# Reassignment Briefing

## References:

- AR 600-8-11 (Reassignment)
- AR 614-100 (Officer Assignment Policies, Details, and Transfers)
- AR 614-200 (Enlisted Assignments and Utilization Management)
- <https://www.hrc.army.mil/content/10677> (Enlisted Compassionate Actions Website)

## **Application Requirements for Deletions and Deferments**

### ✓ Compassionate Deletion or Deferment

- A request based on compassionate reasons or extreme Family problems.
- Requires DA Form 3739 (Application for Compassionate Actions) with a colonel/O-6 endorsement.
- Deferment should be used instead of deletion if the extreme Family problems can be resolved within 90 days of the report date.
- The request will be submitted to HRC within 45 days of assignment notification (30 days for officers), or within 72 hours of the deletion or deferment situation occurring (or becomes known to Soldier).
- If the request is based on medical problems of a Family member, a signed statement from the attending physician giving specific medical diagnosis and prognosis of illness (including date of onset, periods of hospitalization, and convalescence) must be included. If illness is terminal, life expectancy must be included. The medical statement will list any factors bearing on the medical condition, and if the Soldier's presence is requested.
- If the request is based on legal issues, it must include a signed statement from a licensed attorney and include the problems and justification for the Soldier's presence.
- If the request is based upon other than medical or legal problems, supporting statements from responsible persons, such as clergy, social workers, or local law enforcement officials, must be included.
- DEROS is the driving factor in requests for deletion, deferment, or early arrival for Soldiers currently assigned to OCONUS units. Requests that will result in Soldiers departing OCONUS after or prior to their DEROS should be submitted as foreign service tour extensions or curtailments, except for compassionate requests or adverse action.





# Reassignment Briefing

## References:

- AR 600-8-105 (Military Orders)
- DA PAM 600-8-105 (Military Orders)

## Availability Date

### ✓ OCONUS Availability Date

- Availability date establishes the earliest authorized flight departure date.
- Enlisted Soldiers
  - Availability date is set to three (3) calendar days prior to the Soldier's Date Eligible for Return from Overseas (DEROS)
- Officers
  - Availability date is based on the reporting date to the next unit of assignment or Temporary Duty (TDY) station, minus the number of days travel time, leave, and any approved Permissive TDY.
- Soldiers may fly up to nine days past their availability date, unless otherwise stated in orders.
- The availability date is documented as the "Avail date" on the last page of PCS orders.







# Reassignment Briefing

## Reporting Timelines

- ✓ The end date should end one day prior to your report date. (Ex: Leave should end 19 May if Report date is 20 May.)
- ✓ Early Reporting
  - Soldiers must report to their gaining command on or before the report date indicated on their PCS orders.
  - Unless special instructions specifically authorize or prohibit early report, Soldiers departing:
    - CONUS locations may report to the gaining command up to 30 days prior to the report date indicated on the PCS orders.
    - OCONUS locations may report to the gaining command at any time between their availability date and the report date indicated on the PCS orders.
  - Soldiers desiring to report to the gaining command earlier than 30 days prior to the report date on the PCS orders must submit a Personnel Action Requests (PAR) to request early arrival. If approved, the report date will be changed.
- ✓ Soldiers desiring to report to the gaining command after the report date indicated on the PCS orders must request a deferment.





# Forms Completion





# Loose/Stapled Packet in Folder

- ◎ SOU/GTCC
- ◎ DA Form 5118 (Pg. 3). Enlisted and Officers.
- ◎ DA Form 4036-R

*These forms will go with you  
after the Levy Briefing.*



# SOU / GTCC

## Statement of Understanding for Reassignments (ENLISTED ONLY) (INDEF - N/A)

D CAREER/CAREER SOLDIERS: Soldiers that have reenlisted on active duty or have more than 4  
ars for pay purpose at ETS (except if on initial enlistment).

Soldier meets service remaining requirements for this assignment \_\_\_\_\_

I understand that I must extend my current enlistment or reenlist to meet service  
remaining

I officially state that I will not reenlist or extend to meet service remaining requirements  
and will contact my Retention NCO to set up an appointment to sign a Declaration of  
Continued Service Statement (DA Form 4991-R)

Soldier's Signature \_\_\_\_\_

Date \_\_\_\_\_

Career  
Counselor

Enlisted  
complete  
entire  
form

Career Counselor

Name/Rank \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

GTCC Verification (Enlisted and Officers)

Enlisted  
&  
Officers

Officers  
Complete  
only this  
portion

I have a Government Travel Charge Card (GTCC). Yes  No

MEMBERS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Agency Program Coordinator (APC)

APC  
Coordinator

Name/Rank \_\_\_\_\_

Signature \_\_\_\_\_

DATE: \_\_\_\_\_



**PART II - BATTALION STATUS**

INSTRUCTIONS: The Battalion S1 will answer all the questions in Part II (Sections D and E). A checkmark in any of the "Yes" blocks will require a comment in the "Remarks" block indicating the reason for further action, review or possible removal from this assignment. If a question does not apply, check "N/A" block. The Battalion S1 must sign the completed statement and return it to the MPD/Personnel Service Company with the completed Soldier Status Election Statement attached.

1. NAME	2. SSN	3. GRADE	4. PMOS	5. ASI
6. CONTROL LANGUAGE	7. CURRENT UNIT		8. CURRENT UPC	
9. GAINING UNIT		10. EDAS CYCLE NO.	11. TODAY'S DATE (YYYYMMDD) 20210125	
12. ARRIVAL DATE (YYYYMMDD)	13. AI MOS	14. AI ASI	15. AI LANGUAGE	

**Section D - Duty Status**

	YES	NO	N/A
37. Is the soldier currently attached to another installation for the purpose of processing a personnel action?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Is the soldier currently assigned to another unit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. Is the soldier currently assigned to a unit scheduled for permanent overseas deployment (other than unit TDY movement such as REFORGER)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Is the soldier in an AWOL status?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Is the soldier presently confined?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. Is the soldier currently TDY from his/her home station and not scheduled to return at least 60 days prior to the first day of the arrival month?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43. Is the soldier presently undergoing any medical or dental treatment that would prevent this reassignment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Is the soldier awaiting court or trial appearance as a defendant?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Section E -Duty Status**

45. Is the soldier pending an early release from active duty?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Is the soldier pending a Medical Evaluation Board (MMRB/PEB)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47. Is the soldier pending MOS reclassification?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48. Is the soldier under suspension of favorable personnel actions (FLAGGED)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Is the soldier enrolled in Phase III of the Alcohol and Drug Abuse Prevention and Control Program (ADAPCP)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50. Is the soldier scheduled for any schooling not in conjunction with this assignment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Has the soldier applied for specialized training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52. Is the soldier being delayed from complying with these assignment instructions due to administrative processing errors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53. Are there any circumstances not listed above that would preclude the soldier from complying with these assignment instructions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54. Medical Readiness Code (MRC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

55a. I am  I am not  aware of any medical conditions that would prevent me from worldwide deployability

Initials: \_\_\_\_\_ 55b. Date (YYYYMMDD): \_\_\_\_\_

56a. DEPLOYABILITY CERTIFICATION: I certify that this Soldier's deployable status is:  Ready  Not Ready

56b. Physician's name and title or position: \_\_\_\_\_

56b. Physician's Signature: \_\_\_\_\_ 56d. DATE (YYYYMMDD) \_\_\_\_\_

57. REMARKS (Annotate any additional information or discrepancies): \_\_\_\_\_

58a. BATTALION COMMANDER'S SIGNATURE \_\_\_\_\_ 58b. DATE (YYYYMMDD) \_\_\_\_\_

**BN S-1  
COMPLETION**

**PA  
PHYSICIANS  
SIGNATURE  
DATE**

**BN CMDR  
SIGNATURE  
DATE**





# DA Form 4036-R

## MEDICAL AND DENTAL PREPARATION FOR OVERSEAS MOVEMENT

For use of this form, see AR 600 8-11; the proponent agency is DCS, G-1.

### PRIVACY ACT STATEMENT

**Authority:** Title 10, USC, Sections 3010, 8012, and 5031; Title 5, USC, Section 301.

**Principal Purpose:** Information is required on all soldiers being reassigned overseas to determine if they meet medical and dental standards for such assignment.

**Routine Use:** (1) For personnel service support; and (2) information is primarily obtained from review of records unless assignment is to be an isolated area which requires evaluation and personal interview.

**Disclosure:** Disclosure of information is voluntary. If family members are required to complete medical and dental evaluation and personal interview, but refuse to do so, they will not be permitted to accompany the soldier to the overseas assignment.

1. TO		2. FROM	
		IMBL-HRM-REA, ATTN: REASSIGNMENTS BLDG 1/RM 205, FORT BUSS, TX 79916	
3. NAME (Last, Middle, First)		4. SSN	5. GRADE OR RANK
			5B. PMOS OR AOC
6. PRESENT DUTY OF ASSIGNMENT		7. PROJECTED UNIT OF ASSIGNMENT (include location/country)	
8. PROJECTED DUTY MOS OR AOC (9 Position Code)		9. ANTICIPATED DATE OF LOSS	10. IS MEMBER BEING ASSIGNED TO AN ISOLATED AREA AS DERIVED BY AR 40-501, PARA 5-13 C?
			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

11. IF ANSWER TO ITEM 10 IS "YES" AND IF MEMBER IS REQUESTING FAMILY TRAVEL, ALL FAMILY MEMBERS WILL BE SCREENED BY THE LOCAL MEDICAL TREATMENT FACILITY FOR SPECIAL MEDICAL AND FUNCTIONAL NEEDS. ENTER NAMES OF ALL ACCOMPANYING FAMILY MEMBERS, OTHERWISE ENTER N/A.

NAME	NAME

12. LIST ANY OTHER SPECIAL MEDICAL OR DENTAL INSTRUCTIONS CONTAINED IN THE ASSIGNMENT INSTRUCTIONS

**Must be signed by  
Reassignments**

13A. NAME OF MPD/PSC REPRESENTATIVE		B. TITLE	
		REASSIGNMENTS H/R ASSISTANT	
C. SIGNATURE		D. GRADE	E. DATE
		CIV	20230125

DA Form 4036-R, MAR 200 PREVIOUS EDITIONS ARE OBSOLETE Page 1 of 2 APO PE v1.01ES

NAME: \_\_\_\_\_ SSN: \_\_\_\_\_ GRADE: \_\_\_\_\_

Complete the medical and dental status portions below, return the original and one copy to the MPD/PSC within 21 calendar days of the date shown in item 13E, and one copy to the address in item 6.

### MEDICAL STATUS

14A. PHYSICAL PROFILE SERIAL CODE (PULHES)			B. PHYSICAL CATEGORY CODE	C. MEDICAL RECORDS REVEAL THE FOLLOWING ASSIGNMENT LIMITATIONS
YES	NO	N/A	ITEM	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15A. Does the member meet the medical fitness standards outlined in AR 40-501? (If "no" explain briefly)	B. IF CONDITION IS TEMPORARY, EXPECTED DATE MEMBER WILL BE ELIGIBLE FOR ASSIGNMENT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16A. Has member completed HIV screening?	B. DATE, TIME AND LOCATION OF APPOINTMENT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17A. Is the member pregnant?	b. IF "YES", EXPECTED DATE OF DELIVERY
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18A. All active duty and reserve personnel of PCS assignment to Korea will be vaccinated with hepatitis B vaccine. Does the member require immunization?	B. IF "YES", INDICATE DATE, TIME AND LOCATION OF APPOINTMENT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19A. Does the member require remedial medical care?	b. IF "YES", INDICATE DATE, TIME AND LOCATION OF APPOINTMENT(S)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	20A. Is the member currently undergoing alcohol or drug abuse rehabilitation?	B. IF "YES", INDICATE DATE THE MEMBER ENTERED THE REHABILITATION PROGRAM
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21A. If item 10 is checked "yes", can the member be assigned to an area where dental facilities are limited or nonexistent?	B. IF "YES", THE MEMBER (and family members, if applicable) MUST BE SCHEDULED FOR A FOLLOW-UP EVALUATION OF MEDICAL STATUS WITHIN 30 CALENDAR DAYS OF THE ANTICIPATED DATE OF LOSS (Item 9). INDICATE DATE, TIME AND LOCATION OF APPOINTMENT(S)

**Need SRRC Provider's stamp & signature on this page**

22. Medical Records Indicate The Member Requires The Following (Check those appropriate)

REQUIRES	HAS	MISSING	MISSING DATE, TIME AND LOCATION OF APPOINTMENT, IF NEEDED
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A. Two pairs of spectacles
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	B. Protective mask spectacle insert
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C. Two hearing aids
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	D. Medical warning tag

23A. NAME OF MEDICAL OFFICER		B. TITLE	
C. SIGNATURE		D. GRADE	E. DATE

DENTAL STATUS (Complete only if item 10 is checked "yes" or if required by item 12.)

YES	NO	24A. Is the member dentally qualified?	B. IF "NO", BRIEFLY EXPLAIN. IF CONDITION IS TEMPORARY, EXPECTED DATE THE MEMBER WILL BE ELIGIBLE FOR ASSIGNMENT
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	25a. Does the member require remedial dental care?	B. IF "YES", INDICATE DATE, TIME AND LOCATION OF APPOINTMENT
<input type="checkbox"/>	<input type="checkbox"/>	21A. If item 10 is checked "yes", can the member be assigned to an area where dental facilities are limited or nonexistent?	B. IF "YES", THE MEMBER (and family members, if applicable) MUST BE SCHEDULED FOR A FOLLOW-UP EVALUATION OF MEDICAL STATUS WITHIN 30 CALENDAR DAYS OF THE ANTICIPATED DATE OF LOSS (Item 9). INDICATE DATE, TIME AND LOCATION OF APPOINTMENT(S)

27A. NAME OF DENTAL OFFICER		B. TITLE	
C. SIGNATURE		D. GRADE	E. DATE

DA Form 4036-R, MAR 200 Page 2 of 2 APO PE v1.01ES



MEDICAL

Walk-Ins / Appointments

**APPOINTMENTS for Providers / Case Management - will be given a slip with the section, appointment time & person to see**

MON-FRI 0800-1500

Please Call for hours

MONDAY

Please Call for hours

TUESDAY

Please Call for hours

WEDNESDAY

Please Call for hours

THURSDAY

Please Call for hours

FRIDAY

Please Call for hours

**Concerning  
DA Form 4036-R,**

**SRPC Site**

**Information:**

**Vogel Hall,  
1717 Marshall Rd.  
Fort Bliss, Texas 79916**

**915-742-4153**





## Next - Left Side of Folder

- ⦿ These forms will be completed right now.
- ⦿ Starting from top to bottom.





# OCONUS - TO-1 Statement

NAME: \_\_\_\_\_ DoDID: \_\_\_\_\_ GRADE: \_\_\_\_\_  
Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Army Email: \_\_\_\_\_  
Emergency POC Name: \_\_\_\_\_ Emergency POC Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

**TO-1 Statement OCONUS**

1. I will apply for voluntary retirement in lieu of PCS:  YES  NO
2. I will  Accept  Decline the Airborne Assignment:  N/A
3. I will comply with PCS assignment instructions:  YES  NO
4. I will apply for a Deletion or a Deferment:  YES  NO
5. I am TDY en-route, have **family members** and elected TDY Option number: \_\_\_\_\_
6. I will request \_\_\_\_\_ days of leave (PCS LEAVE ONLY) not including days for clearing, nor permissive TDY
7. I will be traveling with a pet (cat/dog):  YES  NO
8. I have a Government Travel Charge Card (GTCC):  YES  NO
9. I elect to serve the following tour:  With family member(s)  Without family member(s)
10. If you elected to serve in an "All Other" or Dependent Restricted short tour and have family members but **will not** be taking them with you, select options that best applies to you.  
 Family will remain at Fort Bliss or previous location  Family will relocate to a different location

If relocating family members please provide information below:

Names of Family Members	Relationship	DOB	Citizenship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Exact address: (Street Address, City, State and Zip Code). NOTE: Your BAH will be based of this address.

Ensure this is complete & correct

All must be completed. If not applicable "N/A" or "None"

Signature \_\_\_\_\_ MPD, Reassignments Rep initials: \_\_\_\_\_  
Soldier's signature





# Reassignment Briefing

## **TDY Options for Schooling in Conjunction with PCS**

- ✓ Soldiers who are authorized movement of Family members at Government expense and are directed to TDY schooling of less than 20 weeks in conjunction with PCS assignment will have the following options for locating their Family members while they perform their TDY:
- **Option 1** (CONUS to CONUS and CONUS to OCONUS only): Family in government quarters remain in government quarters until completion of TDY. The Soldier is authorized Government travel to and from the TDY station and the commander may authorize up to 10 duty days to prepare to move Family upon return from TDY prior to signing out of the present CONUS station.
  - **Option 2** (CONUS to CONUS and OCONUS to CONUS only): Move Family member(s) from present CONUS station to new CONUS duty station prior to reporting to the TDY station. The gaining commander may authorize up to 10 duty days for the Soldier to settle the Family in government quarters (if available) or on the local economy. Soldier will sign into the new CONUS duty station, then proceed TDY for schooling. Soldier is authorized government transportation to and from TDY station.
  - **Option 3** (CONUS to CONUS and CONUS to OCONUS only): Return to present duty station upon completion of TDY to move Family who currently live on the local economy to the new duty station. The Soldier is authorized Government travel to and from the TDY station and the commander may authorize up to 10 duty days to prepare to move Family upon return from TDY prior to signing out of the present CONUS station.
  - **Option 4** (CONUS to CONUS, CONUS to OCONUS, OCONUS to CONUS): Clear current duty station prior to departure for TDY and, at personal expense, move Family to the TDY station or to some other location. Soldier may not be given a certificate of non-availability of government quarters at the TDY station if inadequate government housing is available. The entitlement for Family member(s) transportation will be based on the most direct routing between the old PDS and the new PDS.





# Reassignment Briefing

## **TDY Options for Schooling in Conjunction with PCS**

- ✓ CONUS enlisted Soldiers selected to attend Airborne Training, Recruiter school, or Drill Sergeant school TDY in conjunction with PCS are not authorized to move Family members, household goods, or execute any portion of their PCS entitlements prior to graduating from training.
- ✓ As such, travel options are limited to Option 1 or 3. Failure to complete any of the above training may result in a cancellation of PCS to the new PDS. The intent is to reduce the Army's PCS costs due to high failure rates at these schools.



(Completed by Individual if going TDY en-route with PCS)

# TDY/Schools Form

NAME (Last, First, MI)

SSN

GRADE

Soldiers who are authorized movement of Family members at Government expense and are directed to TDY schooling with PCS assignment will have the following options for locating their Family members while they perform their TDY:

\_\_\_\_ OPTION 1. Elect that dependent(s) currently residing in Government quarters be permitted to remain in Government quarters until completion of TDY period. Under this option Soldier is authorized Government travel to and from TDY station and his or her commander may authorize up to 10 duty days to prepare to move dependent(s) upon return from TDY prior to signing out of the present CONUS station (applies CONUS to CONUS, and CONUS to overseas PCS movements).

\_\_\_\_ OPTION 2. Elect to move dependent(s) from present CONUS and/or overseas station to new CONUS duty station prior to reporting to the TDY station. The gaining commander may authorize up to 10 duty days to settle Soldier's dependent(s) in Government quarters (if available) or on the local economy. Soldier will sign into the new CONUS duty station, then proceed TDY for schooling. Soldier will be authorized Government transportation to and from TDY station (applies to CONUS to CONUS, and overseas to CONUS PCS movements).

\_\_\_\_ OPTION 3. Elect to return to present duty station upon completion of TDY to move dependent(s), who currently live on the local economy (CONUS), to the new duty station. Under this option Soldier is authorized Government travel to and from TDY station, and his or her commander may authorize up to 10 duty days upon return from TDY to prepare to move dependent(s) prior to signing out of the present CONUS station (applies to CONUS to CONUS, and CONUS to overseas PCS movements).

\_\_\_\_ OPTION 4. Elect to clear current permanent station prior to departure for TDY station; and have dependent(s), at personal expense, accompany Soldier to TDY station or travel to some other location. Soldier may not be given a certificate of non-availability of Government quarters at the TDY station if adequate Government housing is available. Soldier's entitlement for dependent transportation will be based on the most direct routing between the old permanent station and the new permanent station (applies CONUS to CONUS, CONUS to overseas, and overseas to CONUS PCS movements). Soldiers who are being reassigned overseas must be medically and dentally qualified for assignment.

This form is only for Soldiers attending school "TDY Enroute" with dependents.

Ensure this is complete & correct

Only initial 1 option

Signature

Date

Signature of Service Member

Signature of Witness

Date



**REASSIGNMENT PROCESSING**

For use of this form, see AR 600-8-11; the proponent agency is DCS, G-1

Block 1 through 35 must be completed by the Military Personnel Division/Personnel Service Company. If additional Action is required, blocks 36 through 40 will be completed as applicable. Prepare this form in two copies. Place one in the Reassigned File and one in the MPRJ.

1. NAME		2. SSN	3. GRADE	4. PMOS	5. ASI
6. CONTROL LANGUAGE		7. CURRENT UNIT OF ASSIGNMENT		8. CURRENT UPC	
9. GAINING UNIT PROCESSING CODE		10. GAINING UNIT			
11. ARRIVAL DATE		12. AI MOS		13. AI ASI	
15. AI LANGUAGE		16. EDAS CYCLE NO.		17. TODAY'S DATE <b>#17</b> 20210125	
18. DATE OF EDAS CYCLE (For Enlisted)		19. DATE OF RFO (For Officers)		20. DATE REASSIGNMENT NOTIFICATION FWD	
22. DATE PCS BRIEFING/ INTERVIEW SCHEDULED <b>#22</b>		23. DATE PCS BRIEFING/ INTERVIEW CONDUCTED <b>#23</b>		24. DATE ACS BRIEFING SCHEDULED <b>#24</b>	
26. DATE DA FORM 4036 FORWARDED TO MTF		27. DATE DA FORM 4036 RECEIVED		25. DATE ACS BRIEFING CONDUCTED <b>#25</b>	
28. DATE PINPOINT ASGMT/FAM TVL REQUEST FWD TO OVERSEAS COMMAND		29. DATE PINPOINT ASGMT/FAM TVL DECISION RECEIVED		30. ANTICIPATED DATE OF LOSS	
31. DATE "DLOS" SUBMITTED		32A. PCS ORDERS NO.		32B. DATE	
33A. PCS AMENDMENT ORDER NO.		33B. DATE		34. REPORT DATE TO OUTPROCESSING	
35. DATE SOLDIER DEPARTED UNIT		36. IF REENLISTMENT/EXTENSION IS REQUIRED (Enlisted Only)			
A. DATE REENLISTMENT OFFICE NOTIFIED		B. DATE REENLISTMENT/EXTENSION COMPLETED			
37. IF SECURITY REQUIREMENTS ARE REQUIRED					
A. DATE REQUEST FOR SECURITY INVESTIGATION/CLINIC FORWARDED TO G2/SECURITY MANAGER		B. DATE SECURITY INVESTIGATION/CLINIC RECEIVED			
38. IF DELETION/DEFERMENT IS REQUIRED					
A. REASON CODE		B. DATE DELETION/DEFERMENT REQUESTED		D. APPROVAL AUTH.	
				(1) HQDA	
				(2) MPD/PSC	
C. DATE DELETION/DEFERMENT FORWARDED TO APPROVAL AUTH.		DATE DELETION/DEFERMENT APPROVED		DATE DELETION/DEFERMENT DISAPPROVED	
39. IF PASSPORT/VISA IS REQUIRED					
A. DATE DD FORM 1056 AND FORM DSP 11 FORWARDED		B. DATE PASSPORT/VISA RECEIVED			
40. IF PORT CALL IS REQUIRED					
A. DATE INITIAL PORT CALL REQUESTED		B. DATE INITIAL PORT CALL RECEIVED			
C. DATE INITIAL PORT CALL CANCELLED		D. DATE SECOND PORT CALL REQUESTED			
E. DATE SECOND PORT CALL RECEIVED		F. DATE SECOND PORT CALL CANCELLED			

**DA FORM 5117**

Date Format:  
**YYYYMMDD**

Annotate today's date.  
If prefilled date is not today,  
cross it out and annotate  
today's date

Annotate today's date



OVERSEAS TOUR ELECTION STATEMENT

For use of this form, see AR 600-8-11; the proponent agency is DSC, G-1

PRIVACY ACT STATEMENT

Authority: Title 10, USC, Section 3010, 8012 and 5031, and Title 5, USC, Section 301.
Principle Purpose: For personnel service support.
Routine Uses: (1) To conduct initial screening of reassignment cycle to determine soldier's eligibility to comply; and (2) basis for initiating specific assignment processing (deletion/deferments; additional service; or any other special processing required).
Disclosure: Disclosure of information is voluntary. However, failure to disclose this data may result in unnecessary hardship on the soldier and/or family members. Failure to disclose data will not automatically exempt soldier from selected reassignment.

INSTRUCTIONS: Prepare this form in two copies. Place the original in the Action Pending section of the soldier's MPRJ and place the copy in the soldier's Reassignment File.

Table with 3 columns: 1. NAME, 2. SSN, 3. GRADE/RANK

4. FOR ALL SOLDIERS

Having been advised that I am scheduled for a permanent change of station assignment to \_\_\_\_\_, I understand that I must elect to serve either an "all others tour" or a "with dependents" tour.

If I elect to serve the "all others" tour, I understand that Government transportation of my family members to or from my overseas duty station will not be authorized during the tour. I also understand that if my family members travel at their own expense to reside at or near the area of my assignment (except for a visit for a period not exceeding 3 continuous months), I will no longer be entitled to Family Separation Allowance. I also understand that under this tour election, I am authorized movement of my family members to a designated location at Government expense. However, after my family members make a move to a designated location at Government expense, I cannot request to change my tour to the "with dependents" tour in order to request movement of my family members to my overseas area unless extreme personal problems arise which are fully documented.

AND

If I elect to serve the "with dependents" tour, I understand that I am not authorized to move my family and/or household goods to a designated location in CONUS. I understand that I must apply promptly for concurrent travel of my family members in order to receive Family Separation Allowance in the event concurrent travel is not approved. I understand that, if concurrent/deferred travel is not approved, I may apply for nonconcurrent travel for my family members after I arrive in my overseas area, if I am able to obtain suitable quarters, or I may elect to have my family members remain in CONUS. I understand I must have sufficient remaining service to complete the "with dependents" tour length requirements upon my arrival in the overseas area. If not, I will be required to serve an "all other" tour and will not be entitled to Government transportation of my family members to my overseas duty station.

5. FOR INVOLUNTARY EXTENSION

I further understand that I will be involuntarily extended in the overseas command if:

I am an obligated volunteer officer (OBV) and do not wish to extend my Active Duty Service Obligation (ADSO) and the end date of my ADSO follows my date eligible for return from overseas (DEROS) within 11 months (long tour area) or six months (short tour area).

I will be returned to the continental U.S. (CONUS) transition point in sufficient time to process my separation. To be reassigned to CONUS at my normal DEROS, I must be eligible for and take action to acquire sufficient service to have the required months remaining at DEROS.

6. FOR ALL ARMY SOLDIERS MARRIED TO OTHER ARMY SOLDIERS

I have been briefed and understand the joint domicile requirements.

7. FOR USAR OBC OFFICERS

I understand that I currently have insufficient remaining service to complete the "with dependents" tour, that by electing the "with dependents" option below, I am concurrently volunteering herewith to extend my ADSO until completion of the prescribed tour.

8. FOR ALL SOLDIERS

Regarding my option to elect either the "all others" or the "with dependents" tour, I choose the following actions, to include any additional involuntary extended time in the overseas command.

a. Regarding my option to elect either the "all others" or the "with dependents" tour, I choose the following actions, to include any additional involuntary extended time in the overseas command.

b. [ ] I elect to serve a tour for a period of \_\_\_\_\_ months in an "all others" status.

[ ] I elect to serve a tour for a period of \_\_\_\_\_ months in an "with dependents" status.

Signature

Date

DA FORM 5121

Ensure this is complete & correct

Location of PCS Assignment





# Reassignment Briefing

## **DA Form 5118 (Reassignment Status and Election Statement)**

### ✓ DA Form 5118

- This form is used to conduct initial screening of assignment instructions to determine the Soldier's eligibility for the assignment.
- Part I is completed by the Reassignments Processing Center, and is used to determine:
  - If the Soldier meets general assignment eligibility, such as stabilization, time on station, and MOS qualification.
  - if the Soldier requires additional security clearance/background investigation processing.
  - If the Soldier must acquire additional service to comply with the assignment.
- Part II is completed by the Battalion S1 and is used to determine if the Soldier meets general assignment eligibility, such as duty status, adverse actions, and separation processing.
- Parts III and IV are completed by the Soldier and is used to determine:
  - If the Soldier intends to retire or decline an airborne assignment.
  - If the Soldier meets general eligibility requirements for OCONUS assignment and assignment to hostile fire areas.
  - If the Soldier's Family requires any special consideration.
  - If the Soldier desires to participate in the HAAP.
- Part V is completed by the Soldier's medical treatment facility, as is used to determine if the Soldier meets medical requirements for the assignment.





# Enlisted Only

## DA Form 5118 Page 4

### PART III - BATTALION STATUS

INSTRUCTIONS: You will answer all the questions in Part III (Sections F and G). A checkmark in any of the "Yes" blocks will require a comment in the "Remarks" block indicating the reason for further action, review or possible removal from this assignment. If a question does not apply, the "N/A" block. You must sign the completed statement and return it to the Battalion S1.

1. NAME	2. SSN	3. GRADE	4. PMOS	5. ASI
6. CONTROL LANGUAGE	7. CURRENT UNIT		8. CURRENT UPC	
9. GAINING UNIT	10. EDAS CYCLE NO.		11. TODAY'S DATE (YYYYMMDD) 20210125	
12. ARRIVAL DATE (YYYYMMDD)	13. AI MOS	14. AI ASI	15. AI LANGUAGE	

#### Section F - Personal Status

	YES	NO	N/A
59. Do you have an approved retirement date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. If you are being assigned to an airborne position, do you wish to terminate your airborne status?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
61. Are you being assigned to a duty or an area for which you have a reassignment restriction for the reason of prior sensitive duty assignment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Do you have an enlistment or reenlistment commitment for other than the area of this assignment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Are you a pregnant soldier?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
64. Are you a sole parent or married to an Army soldier?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
65. Is your spouse pregnant?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
66. Do you have an extreme family situation that meets the requirements outlined in table 2-1, AR 600-8-11?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Section G - To and From OCONUS Status

	YES	NO	N/A
67. Do you have any family members with a physical, emotional, developmental or intellectual disorder who are not enrolled in the Exceptional Family Member Program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
68. Have you failed to complete initial entry training (12 weeks military training or its equivalent) required before your overseas movement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
69. If you have received assignment instructions to Turkey, are you or your spouse a Turkish or dual U. S.-Turkish national?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
70. Are you being assigned overseas to a country where you committed a crime that resulted in civil or military imprisonment or conviction by a foreign tribunal?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
71. Are you being involuntarily reassigned to an unaccompanied short tour area following 12 cumulative months TDY during a 24-month period?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
72. Do you desire to report in early to the gaining overseas command?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
73. If you have received assignment instructions to a dependent restricted area (short tour area), do you want to participate in the Home base Assignment Program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
74. If you have received assignment instructions to a dependent restricted area (short tour area), do you want to participate in the Advance Assignment Program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
75. REMARKS (Annotate any additional information or discrepancies)			

**59 - 75**  
Mark either  
(Yes, No, or N/A)

## DA Form 5118 Page 5

### PART III - BATTALION STATUS

INSTRUCTIONS: You will answer all the questions in Part III (Sections H). A checkmark in any of the "Yes" blocks will require a comment in the "Remarks" block indicating the reason for further action, review or possible removal from this assignment. If a question does not apply, the "N/A" block. You must sign the completed statement and return it to the Battalion S1.

1. NAME	2. SSN	3. GRADE	4. PMOS	5. ASI
6. CONTROL LANGUAGE	7. CURRENT UNIT		8. CURRENT UPC	
9. GAINING UNIT	10. EDAS CYCLE NO.		11. TODAY'S DATE (YYYYMMDD) 20210125	
12. ARRIVAL DATE (YYYYMMDD)	13. AI MOS	14. AI ASI	15. AI LANGUAGE	

#### Section H - Personal Status

	YES	NO	N/A
77. Have you applied for Conscientious Objector status?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
78. Are you a sole surviving son or daughter?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
79. Are you being reassigned to a hostile fire area and have immediate family members whose service in that area resulted in death, disability, missing in action, or prisoner of war status?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
80. Are you a former Peace Corps member being reassigned to the country in which you have served?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
81. Are you a former Prisoner of War or Hostage being reassigned to the country where you were held captive?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
82. Have you been hospitalized at least 30 days outside a hostile fire area due to a wound received in that area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
83. REMARKS (Annotate any additional information or discrepancies)			

**77 - 82**  
Mark either  
(Yes, No, or N/A)

84a. SOLDIER'S SIGNATURE

Signature

84b. DATE (YYYYMMDD)

Date

DA FORM 5118, OCT 2012

Page 5 of 5  
APD If v1.00ES

76a. SOLDIER'S SIGNATURE

Signature

76b. DATE (YYYYMMDD)

Date

DA FORM 5118, OCT 2012

Page 4 of 5  
APD If v1.00ES





### DHR, Reassignments (Overseas) LEVY briefing Checklist

The following information and forms were covered during your Overseas LEVY briefing:

- Int: \_\_\_\_\_ 1. Statement of Understanding - (Enlisted only)
- Int: \_\_\_\_\_ 2. TO-1 Statement (All)
  - a. Deletion/Deferment requests (DA 4187)
  - b. TDY Enroute Options (Soldier's TDY enroute with family members only)
  - c. Overseas: with family members or "All Others" tour.
  - d. Homebase/Advance Assignment Program (HAAP)
- Int: \_\_\_\_\_ 3. DA Form 5117 (Reassignments Processing) (All)
- Int: \_\_\_\_\_ 4. DA Form 5121 (Overseas Tour Election Statement) (All)
- Int: \_\_\_\_\_ 5. DA Form 5118 (Reassignments Status and Election Statement) - Enlisted only
- Int: \_\_\_\_\_ 6. DA Form 5434 (Sponsorship Program counseling and Information Sheet) (All)
 

Note: You must go into ACTnow and complete blocks 1, 2, 4, & 5) - Verification of initial action required
- Int: \_\_\_\_\_ 7. DA Form 036-R Medical and Dental Preparation for Overseas Movement) (All)
 

Note: This form must be completed at the Soldier Resilience & Readiness Center (SRRC).
- Int: \_\_\_\_\_ 8. AT Level 1 (All) Note: Must be within six (6) months of your report date. (All)
- Int: \_\_\_\_\_ 9. DA Form 888 (Family Member Deployment Screening Sheet)
 

Note: This form is automatically forwarded to the Mendoza Clinic by Reassignments Family Travel Rep.
- Int: \_\_\_\_\_ 10. DA Form 4787-R (Reassignments Processing) (To be completed by soldier who are trying to take family members overseas).
- Int: \_\_\_\_\_ 11. VPC (Vehicle Processing Center) - Designated drop off point is Dallas, TX.
- Int: \_\_\_\_\_ 12. Family Travel Request (EFMP packet)
 

Note: Family Travel Request or Request for Command Sponsorship is done by Reassignments upon receipt of EFMP packet from Mendoza Clinic.
- Int: \_\_\_\_\_ 13. No Fee Passport applications.
 

Note: You do not need orders to submit No Fee passport applications. You must complete applications according to our instructions from the Department of State and schedule appointment via e-mail with our passport office.

\*\* By signing this page, you concur with all documents covered and acknowledge the information is correct and true and also that you are aware of what is required to receive your PCS orders.

\_\_\_\_\_  
Signature

Soldier's signature

\_\_\_\_\_  
Date

Date

\_\_\_\_\_  
MPD/Reassignments Rep signature

\_\_\_\_\_  
Date

Note: Please go through your 51's for any questions pertaining to your PCS orders.

# Reassignments Checklist

Initial all

1 - 13

This form will  
be completed  
at the end  
of the  
Levy Briefing





U.S. ARMY



# *FAMILY TRAVEL*



# FAMILY TRAVEL

## **Family Travel Application Requirements for Overseas Tour**

- ✓ Family Travel/Command Sponsorship
  - Soldiers who desire their Family members accompany them to the new overseas duty station (not a dependent-restricted tour) must initiate Family Member Travel Screening (see EFMP slides) and apply for Command Sponsorship for their dependents as soon as possible. The gaining command is the only Command Sponsorship approving authority.
  - The Family travel authorization must be included on Soldiers' PCS orders, with Family members listed by name.
  - The overseas commander will approve concurrent travel when the Family members can be accommodated within 60 days after the sponsor's arrival in the overseas command. Deferred travel normally will be approved when the Family members can be accommodated within 61–140 days after the sponsor's arrival in the overseas command (for U.S. Army Europe only, deferred travel is between 31 and 140 days).
- ✓ Some Host Nations do not recognize a same-sex spouse as an authorized Family member. Command Sponsorship that violates an applicable Status of Forces Agreement (SOFA) will not be approved.
- ✓ Command sponsorship will not be granted to a Family member who is a registered sex offender.





# FAMILY TRAVEL

## **Family Travel Application Requirements for Overseas Tour**

- ✓ Requests for Family Travel must include
  - DA Form 5121 (Overseas Tour Election Statement) electing to serve with dependents.
  - DA Form 4787 (Reassignment Processing) listing all authorized dependents who will accompany the Soldier.
  - DA Form 5888 (Family Member Deployment Screening Sheet): All Family members must be screened at an Army EFMP clinic. EFMP screening is valid for 1 year.
  - DD Form 2792 (Family Member Medical Summary) and or DD Form 2792-1 (Special Education/Early Intervention Summary), if applicable.
  - DD Form 1172-2 (Application for Identification Card/DEERS Enrollment).
- ✓ Once all documents have been received by the Family travel section they will forward the request to the gaining command. The gaining command may take up to 30 days to process the request.
- ✓ Once Command Sponsorship is approved by the OCONUS command the Family member(s) can submit Passport/Visa application(s). It can take 4-6 weeks to complete this process and receive the Passports/Visa.





# DA Form 4787

## REASSIGNMENT PROCESSING

For use of this form, see AFR 600-5-11; the proposing agency is DCS, G-1

### PRIVACY STATEMENT

**Authority:** Title 10, USC, Sections 3010, 3012 and 6031; Title 5, USC, Section 501; and EO 13607 (SSN).  
**Medical Purpose:** To make assignment decisions, evaluate family member travel to overseas commands and assign family housing.  
**Information:** Certain disclosures permitted by the Privacy Act and the Army's systems of records notices apply.  
**Disclosure:** Disclosure of information is voluntary. If the information is not provided, commanders will not be aware of family member travel and housing requests, and will result in no government travel and housing for family members.

### PART A - PERSONNEL AND ASSIGNMENT MANAGEMENT DATA (To be completed by Losing APO/PSG)

1. TO		2. FROM IMWE-BLS-HRM-ATTN: REASSIGNMENTS BLDG 606/RM205, FT BLISS, TX 79916			
3. NAME (Last, first MI) <b>DOE, JOHN</b>	4. SSN <b>111-22-3333</b>	5. GRADE <b>E-2PV2</b>	6. RMOS <b>11X1000YY</b>		
7A. CURRENT ASSIGNMENT <b>72ND MP DET LAW FORT BLISS, TX 79916</b>		7B. REASSIGNED TO (UNIT/COMP/POC/ACTY) <b>USAR ELE DEF EQ OPP MG FORT STEWART, GA</b>			
8. TELEPHONE NO. (Include Area Code)		9B. RSG AUTH	9C. PERS CON NO.	9D. REPORT DATE (YYYYMMDD) <b>2021-01-10</b>	

9E. ADD EMAIL ADDRESS					
10. TDY Expense: (Complete only if applicable)					
A. MOBILE PHONE		B. PURPOSE DETD		C. SGLI/TERM DATE	
11. Married Army Couples Program (Complete only if you/demand will be requested)					
11A. BRANCH OF MILITARY BRANCH		11B. SSN	11C. SERVIC	11D. PMS	
12. CURRENT RESIDATION				13. TELEPHONE NO. (Include Area Code)	

### PART B - HOUSING AND FAMILY TRAVEL DATA

14. HSA	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A	15. Have family members with physical, emotional, developmental or intellectual problems.	
16. I am a sole parent (Check only if applicable)					
17. Application for Family Member Travel to Overseas Command (Check only one)					
a.		I have command level and will accept economy quarters if government quarters are not available			
b.		I have command level but will not accept economy quarters			

18. Family Members Who Will Travel to Next Permanent Duty Station (If more space is needed, continue on a separate sheet.)					
A. NAME (Last, first MI)	B. RELATIONSHIP	C. SEX	D. DATE OF BIRTH	E. CITIZENSHIP	

19. ADDRESS WHERE MY FAMILY IS CURRENTLY LOCATED		20. ADDRESS WHERE MY FAMILY MAY BE CONTACTED WHILE ON LEAVE			
21. TELEPHONE NO. (Include Area Code)		22. TELEPHONE NO. (Include Area Code)			
23. The writer hereby certifies that the information is true and correct. Certain disclosures permitted by the Privacy Act and the Army's systems of records notices apply. <input type="checkbox"/> Unpublished <input type="checkbox"/> Published					

24. SENDER'S SIGNATURE	25. MIDRANK OFFICIAL'S SIGNATURE	26. REASSIGNMENT TRACKING CENTER EMAIL ADDRESS <b>fb_family_travel@conus.army.mil</b>	27. DATE (YYYYMMDD)
------------------------	----------------------------------	--	---------------------

DA FORM 4787-R, MAR 2007

PREVIOUS EDITIONS ARE OBSOLETE

ADD 04 1103





REPLY TO  
ATTENTION OF:

DEPARTMENT OF THE ARMY  
HEADQUARTERS, 8TH ARMY  
UNIT #15316  
APO AP 96205-5316

### EXAMPLE

EAGA-HRSD

9 September 2015

MEMORANDUM FOR USAG-Y, MPD Team CSP, APO AP 96205

SUBJECT: Soldier Declaration

1. In accordance with Army Regulation 614-30 Para 3-5a (5), I make the following declaration:

The Family member(s) for whom I am requesting command sponsorship does not have any qualifying convictions for offenses listed under 42 USC 16911, or Army Regulation 27-10. I understand that if I am granted command sponsorship and my Family member(s) is convicted of a qualifying offense at anytime during the overseas tour, the command sponsorship will be revoked. Furthermore, I understand that the identified Family member(s) will be processed for early return from the overseas location.

2. The point of contact for this action is the undersigned at DSN 724-\*\*\*\* or [joe.snuffv@mail.mil](mailto:joe.snuffv@mail.mil).

JOSEPH SNUFFY  
SPC, USA





**DEPARTMENT OF THE ARMY**  
INSTALLATION MANAGEMENT COMMAND  
HEADQUARTERS, UNITED STATES ARMY GARRISON HUMPHREYS  
UNIT #15228  
APO AP 96271-5228

AMIM-HMH-M

11 November 2021 ]

MEMORANDUM FOR Military Personnel Division USAG Humphreys, Command  
Sponsorship Program, APO, AP 96271-5228

SUBJECT: Command Sponsorship Family Member Statement.

1. In accordance with (IAW) AR 608-75, Family members will be screened when the Soldier is on assignment instructions to an OCONUS area for which command sponsorship/Family member travel is authorized and the Soldier elects to serve the accompanied tour. This applies to CONUS-to-OCONUS and OCONUS-to-OCONUS reassignments. \_\_\_\_\_ (SM Initials)
2. I understand that Command Sponsorship will not be requested until the DA Form 5888 has been completed for all Family Member physically residing with me \_\_\_\_\_ (SM Initials)
3. I understand that in order to request Dependent Student Travel IAW AR 55-46 and the Joint Travel Regulation that my student dependent must be Command Sponsored. \_\_\_\_\_ (SM Initials)
4. IAW AR 608-75, Soldiers who knowingly and willfully disregard or provide false information may be subject to Uniform Code of Military Justice (UCMJ, Art 92 and Art 107). \_\_\_\_\_ (SM Initials)
5. I have read and understand these statements \_\_\_\_\_ (SM Initials)
6. Point of contact for this memorandum is the MPD that completed the Family Travel request

\_\_\_\_\_  
Soldier's Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date





# Contact Information

## Fort Bliss Family Travel:

**915-568-9885**

**915-568-7163**

**915-568-3325**

**For EFMP issues/concerns, contact EFMP Mendoza Clinic at  
915-742-3715.**

## Address:

**Pershing Rd., Bldg. 1, Rm 212  
Fort Bliss, TX 79916**







U.S. ARMY



# PASSPORTS/VISAS



# Reassignment Briefing

## References:

- AR 55-46 (Travel Overseas)
- <https://www.fcg.pentagon.mil> (Foreign Clearance Guide)
- <https://travel.state.gov/content/travel/en/passports/need-passport.html> (Department of State Website)

## Passport/Visa/Travel Document Requirements

### ✓ Soldiers

- Not all countries require passports; some only require orders and military ID card to enter the country. Check the DOD Foreign Clearance Guide website to verify passport requirement: <https://www.fcg.pentagon.mil>.

### ✓ Family members

- All command-sponsored, U.S. citizen Family members require a government no-fee passport, and possibly a visa, to PCS to a foreign country. Family members arriving overseas without a no-fee passport/visa when required will be denied entry and returned to CONUS at personal expense.
- Family members who are not U.S. citizens will travel on their personal passport issued by their country of citizenship.
- For information and instructions on how to apply for a no-fee passport for official government travel, visit <https://travel.state.gov/content/travel/en/passports/need-passport.html>.
- Family member travel is delayed frequently because of passport processing time. Family member applications for passports should be completed immediately after Family travel has been approved.
- Soldiers traveling with Family through Canada enroute to or from Alaska are recommended to apply for no-fee passports.





# Reassignment Briefing

References:

- AR 55-46 (Travel Overseas)
- <https://www.fcg.pentagon.mil> (Foreign Clearance Guide)
- <https://travel.state.gov/content/travel/en/passports/need-passport.html> (Department of State Website)
- <https://www.uscis.gov/> (U.S. Citizenship and Immigration Services Website)

## **Passport/Visa/Travel Document Requirements**

- ✓ Official passports may not be used for personal leisure travel to foreign countries. OCONUS passport offices present long delays in processing. The Department of State recommends individuals desiring a tourist passport for leisure travel obtain one prior to departing CONUS.
- ✓ Please be advised some assignments require a Visa in addition to Passports. A Visa will require additional time to process and cannot be requested until all Passports are received.
- ✓ Family members are required to have a current DEERS ID Card (10 years of age or older), Official Passport, and Visa (if required) in order to travel OCONUS.
- ✓ Soldiers moving from OCONUS to CONUS for the first time with a foreign spouse must obtain an Immigration Visa. Information is available at the United States Citizenship and Immigration Services website at <https://www.uscis.gov/>.





# Passport Briefing

## Passport/Visa/Travel Document Requirements

### Who Requires a No-Fee Passport ???

- ✓Based on PCS Assignment and Foreign Clearance Guide (FCG). Most common places requiring family members to have No-Fee Passports are: Germany, Italy, Korea, Japan, UK. (Alaska is strongly recommended).
- ✓Hawaii- Passport NOT required.
- ✓Some cases, Soldiers and family members may require to have an Official or Diplomatic Passport as specified by the Foreign Clearance Guide.
- ✓Dependents who are not US citizens, please contact our office.





# Passport Briefing

## Passport/Visa/Travel Document Requirements

### No-Fee Passport and the Tourist Passport

**There are 2 kinds of passports. No-Fee Passport and the Tourist Passport.**

**Our office will only process No-Fee Passports. Tourist Passports are processed off post at the nearest Post Office.**





# Passport Briefing

## Passport/Visa/Travel Document Requirements

### Passport Instructions Sheet

**The link below is our Fort Bliss Passport website. At the bottom of the website are links to guide you in the completion of the passport application. Additional information can be**

**<https://home.army.mil/bliss/index.php/about/Garrison/directorator-human-resources/passports>**





# Most Common Forms

**DS-11: Initial U.S. Passport Application**

**DS-82: Renewal U.S. Passport Application**

**DS-3053: Consent For Issuing A Passport To A Child**

<https://travel.state.gov/content/travel/en/passports/requirements/forms.html>





# APPLICATION FOR A U.S. PASSPORT

Please Print Legibly Using Black Ink Only

OMB CONTROL NO. 1405-0004  
OMB EXPIRATION DATE: 01-31-2017  
ESTIMATED BURDEN: 35 MIN

# DS-11

Attention: Read WARNING on page 1 of instructions  
Please select the document(s) for which you are applying:

- U.S. Passport Book  U.S. Passport Card  Both  
The U.S. passport card is not valid for international air travel. For more information see page 1 of instructions.  
 28 Page Book (Standard)  52 Page Book (Non-Standard)

Note: The 52 page option is for those who frequently travel abroad during the passport validity period, and is recommended for applicants who have previously required the addition of visa pages.

## 1. Name Last

DOE

First Middle

JOHN

WAYNE

## 2. Date of Birth (mm/dd/yyyy)

01 01 1980

## 4. Place of Birth (City & State if in the U.S., or City & Country as it is presently known.)

EL PASO, TX

## 5. Social Security Number

123 45 6789

## 6. Email Address (e.g., my\_email@domain.com)

JOHN.WAYNE.DOE.MIL@MAIL.MIL

## 7. Primary Contact Phone Number

123-456-7890

## 8. Mailing Address: Line 1- Street/RFD#, P.O. Box, or URB.

**IMBL-HRM-FT PASSPORT OFFICE <- ADDRESS Line 1  
PERSHING RD. BLDG 1 RM 211, COMMANDER <- Line 2  
FORT BLISS, TX 79916**

FORT BLISS TX 79916

## 9. List all other names you have used. (Examples: Birth Name, Maiden, Previous Marriage, Legal Name Change. Attach additional pages if needed)



## STOP! CONTINUE TO PAGE 2

DO NOT SIGN APPLICATION UNTIL REQUESTED TO DO SO BY AUTHORIZED AGENT

Identifying Documents - Applicant or Mother/Father/Parent on Second Signature Line (if identifying minor)

Driver's License  State Issued ID Card  Passport  Military  Other

Name

Issue Date (mm/dd/yyyy) Exp. Date (mm/dd/yyyy) State of Issuance

ID No.

Country of Issuance

Identifying Documents - Applicant or Mother/Father/Parent on Third Signature Line (if identifying minor)

Driver's License  State Issued ID Card  Passport  Military  Other

Name

Issue Date (mm/dd/yyyy) Exp. Date (mm/dd/yyyy) State of Issuance

ID No.

Country of Issuance

I declare under penalty of perjury all of the following: 1) I am a citizen or non-citizen national of the United States and have not, since acquiring U.S. citizenship or nationality, performed any of the acts listed under "Acts or Conditions" on page four of the instructions of this application (unless explanatory statement is attached); 2) the statements made on the application are true and correct; 3) I have not knowingly and willfully made false statements or included false documents in support of this application; 4) the photograph attached to this application is a genuine, current photograph of me; and 5) I have read and understood the warning on page one of the instructions to the application form.

Acceptance Agent  (Vice) Consul USA

Passport Staff Agent

(Seal)

Name of courier company (if applicable)

Facility ID Number

Facility Name/Location

Agent ID Number

Signature of person authorized to accept applications

Date

X Applicant's Legal Signature - age 16 and older

X Mother/Father/Parent/Legal Guardian's Signature (if identifying minor)

X Mother/Father/Parent/Legal Guardian's Signature (if identifying minor)

- Do not sign before your appointment.
- Ensure the barcode is visible.
- Do not staple photo.
- Approval of Command Sponsorship is required in order to submit passport applications.







U.S. ARMY

# Parental Information Must be a mirror image of the Birth Certificate

Full Name of Current Spouse or Most Recent Spouse		Date of Birth (mm/dd/yyyy)	Place of Birth
U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of Marriage (mm/dd/yyyy)	Have you ever been widowed or divorced? <input type="checkbox"/> Yes <input type="checkbox"/> No	Widow/Divorce Date (mm/dd/yyyy)
12. Additional Contact Phone Number		13. Occupation (if age 16 or older)	14. Employer or School (if applicable)
		<input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work	
15. Height	16. Hair Color	17. Eye Color	18. Travel Plans
			Departure Date (mm/dd/yyyy) Return Date (mm/dd/yyyy) Countries to be Visited
19. Permanent Address - If P.O. Box is listed under Mailing Address <u>or</u> if residence is different from Mailing Address.			
Street/RFD # or URB (No P.O. Box)			Apartment/Unit
City		State	Zip Code
20. Emergency Contact - Provide the information of a person not traveling with you to be contacted in the event of an emergency.			
Name		Address: Street/RFD # or P.O. Box	
City		State	Zip Code
Phone Number		Relationship	
21. Have you ever applied for or been issued a U.S. Passport Book or Passport Card? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, complete the remaining items in #21.			
Name as printed on your most recent passport book		Most recent passport book number	Most recent passport book issue date (mm/dd/yyyy)
Status of your most recent passport book: <input type="checkbox"/> Submitting with application <input type="checkbox"/> Stolen <input type="checkbox"/> Lost <input type="checkbox"/> In my possession (if expired)			
Name as printed on your most recent passport card		Most recent passport card number	Most recent passport card issue date (mm/dd/yyyy)
Status of your most recent passport card: <input type="checkbox"/> Submitting with application <input type="checkbox"/> Stolen <input type="checkbox"/> Lost <input type="checkbox"/> In my possession (if expired)			

**PLEASE DO NOT WRITE BELOW THIS LINE - FOR ISSUING OFFICE ONLY**

Name as it appears on citizenship evidence _____		 * DS 11 C 09 2013 2 *	
<input type="checkbox"/> Birth Certificate	SR CR City Filed: _____		issued: _____
<input type="checkbox"/> Nat. / Citiz. Cert.	USCIS USDC Date/Place Acquired: _____		A# _____
<input type="checkbox"/> Report of Birth	Filed/Place: _____		
<input type="checkbox"/> Passport C/R	S/R Per PIERS #/DOI: _____		
<input type="checkbox"/> Other: _____			
<input type="checkbox"/> Attached:			
<input type="checkbox"/> P/C of ID <input type="checkbox"/> DS-3053 <input type="checkbox"/> DS-64 <input type="checkbox"/> DS-5520 <input type="checkbox"/> DS-5513 <input type="checkbox"/> Citiz W/S <input type="checkbox"/> P/C of Citiz <input type="checkbox"/> DS-10 <input type="checkbox"/> DS-86 <input type="checkbox"/> DS-71 <input type="checkbox"/> IRL <input type="checkbox"/> CIS Ver			





Please Print Legibly Using Black Ink Only

# DS-82

## Passport Application

- Do not sign before your appointment.

- Ensure the barcode is visible.

- Do not staple photo.

- Approval of Command Sponsorship is required in order to submit passport applications.



Attention: Read WARNING on page 1 of instructions  
Please select the document(s) for which you are applying:

U.S. Passport Book     U.S. Passport Card     Both  
The U.S. passport card is not valid for international air travel. For more information see page 1 of instructions.

Regular Book (Standard)     Large Book (Non-Standard)  
Note: The large book option is for those who frequently travel abroad during the passport validity period, and is recommended for applicants who have previously required the addition of visa pages.

1. Name Last: **DOE**    Middle: **WAYNE**    First: **JOHN**

2. Date of Birth (mm/dd/yyyy): **01 01 1980**    3. Sex: **X** (M)    4. Place of Birth (City & State if in the U.S., or City & Country as it is presently known.): **EL PASO, TX**

5. Social Security Number: **123 45 6789**    6. Email (Info alerts offered at [travel.state.gov](http://travel.state.gov)): **JOHN.WAYNE.DOE.MIL@MAIL.MIL**    7. Primary Contact Phone Number: **123-456-7890**

8. Mailing Address: Line 1: Street/RFD#, P.O. Box, or URB. **IMBL-HRM-FT PASSPORT OFFICE <- ADDRESS Line 1  
PERSHING RD. BLDG 1, RM 211, COMMANDER <- Line 2  
FORT BLISS, TX 79916**

9. List all other names you have used. (Examples: Birth Name, Maiden, Previous Marriage, Legal Name Change. Attach additional pages if needed)

10. Passport Book and/or Passport Card Information  
Your name as printed on your most recent U.S. passport book and/or passport card  
**JOHN WAYNE DOE**

Most recent passport book number	Issue date (mm/dd/yyyy)
<b>111111111</b>	<b>01/01/2010</b>
Most recent passport card number	Issue date (mm/dd/yyyy)

11. Name Change Information Complete if name is different than last U.S. passport book or passport card

Changed by Marriage	Place of Name Change (City/State)	Date (mm/dd/yyyy)
Changed by Court Order		

Please submit a certified copy. (Photocopies are not accepted!)

**CONTINUE TO PAGE 2**

**YOU MUST SIGN AND DATE THE APPLICATION IN THE DESIGNATED AREA BELOW**  
I declare under penalty of perjury all of the following: 1) I am a citizen or non-citizen national of the United States and have not, since acquiring U.S. citizenship or nationality, performed any of the acts listed under "Acts or Conditions" on page four of the instructions of this application (unless explanatory statement is attached); 2) the statements made on the application are true and correct; 3) I have not knowingly and willfully made false statements or included false documents in support of this application; 4) the photograph submitted with this application is a genuine, current photograph of me; and 5) I have read and understood the warning on page one of the instructions to the application form.

X \_\_\_\_\_ Date \_\_\_\_\_  
Applicant's Legal Signature

FOR ISSUING OFFICE ONLY     PPT BK C/R     PPT BK S/R     PPT CD C/R     PPT CD S/R

Marriage Certificate    Date of Marriage/Place Issued: \_\_\_\_\_

Court Order    Date Filed/Court: \_\_\_\_\_

From: \_\_\_\_\_

To: \_\_\_\_\_


Other: \_\_\_\_\_

Attached: \_\_\_\_\_

For Issuing Office Only    Bk Fee    Cd Fee    EF    Postage    Other    \* DS 82 B 08 2013 1 \*



# Passport Briefing

Name of Applicant (Last, First & Middle)				Date of Birth (mm/dd/yyyy)	
DOE, JOHN WAYNE				01/01/1980	
12. Height	13. Hair Color	14. Eye Color	15. Occupation	16. Employer or School (if applicable)	
5ft. 5in.	BLACK	GREEN	SGT	US ARMY	
17. Additional Contact Phone Numbers					
Home		Cell		Home	
Work		Work		Work	
18. Permanent Address: If P.O. Box is listed under Mailing Address or if residence is different from Mailing Address.					
Street/RFD # or URB (No P.O. Box)				Apartment/Unit	
142 E. BLOOM STREET					
City			State	Zip Code	
EL PASO			TX	79916	
19. Emergency Contact - Provide the information of a person not traveling with you to be contacted in the event of an emergency.					
Name		Address: Street/RFD # or P.O. Box		Apartment/Unit	
JANE DOE		142 E. BLOOM STREET			
City		State	Zip Code	Phone Number	Relationship
EL PASO		TX	79916	012-345-6789	SPOUSE
20. Travel Plans					
Departure Date (mm/dd/yyyy)		Return Date (mm/dd/yyyy)		Countries to be visited	
01/01/2018		01/01/2019		UAE	
<b>STOP! YOU HAVE COMPLETED YOUR APPLICATION BE SURE TO SIGN AND DATE PAGE ONE</b>					
<b>WHERE DO I MAIL THIS APPLICATION?</b>					
<u>If applying in the United States or Canada:</u>					
<b>FOR ROUTINE SERVICE</b> (If you live in CA, FL, IL, MN, NY, or TX): National Passport Processing Center P.O. Box 640155 Irving, TX 75064-0155		<b>FOR ROUTINE SERVICE</b> (If you live in any other state or Canada): National Passport Processing Center P.O. Box 90155 Philadelphia, PA 19190-0155		<b>FOR EXPEDITED SERVICE</b> (Additional Fee, any state or Canada): National Passport Processing Center P.O. Box 90955 Philadelphia, PA 19190-0955	
Because of the sensitivity of the enclosed documents, Passport Services recommends using trackable mailing service when submitting your application.					
<u>If applying outside the United States or Canada:</u>					
United States citizens residing outside the U.S. or Canada <b>CANNOT</b> submit this form to domestic addresses listed above. Such applicants should visit <a href="http://www.usembassy.gov">www.usembassy.gov</a> to find the nearest U.S. Embassy or Consulate for procedures for applying outside the United States.					
 * DS 82 B 08 2013 2 *					





# Passport Briefing

The following blocks need to have our office information.



U.S. DEPARTMENT of STATE

Online Passport Application

TRAVEL.STATE.GOV

Need help with this site?

## Contact Information

Where should the passport be mailed?

**Note:** Please complete this section with a mailing address even if you are picking up your new passport directly from a passport agency.

Street Address/RFD#, P.O. Box, or URB. \*

Street Address 2  
(apartment, company, suite, unit, building, or floor if applicable): ?

City: \*

Country: \*

UNITED STATES ▼

State: \*

Please Select... ▼

Zip Code: \*

In Care Of (e.g. In Care Of - Jane Doe): ?

Is This Your Permanent Address? \*

Yes  No

## Preferred Method of Communication

Preferred Method of Communication \* ?

Mail  email  Both

1. Insert:  
**IMBL-HRM-FT PASSPORT OFFICE**

2. Insert:  
**PERSHING RD BLDG. 1 RM 211**

3. Insert:  
**FORT BLISS**

4. Insert:  
**UNITED STATES**

5. Insert:  
**TX**

6. Insert:  
**79916**

7. Type in the word:  
**COMMANDER**

8. Select "NO" and input your physical address.

9. Once you have completed your physical address scroll down to complete the rest of the information. See next slide.



# Passport Briefing

## Passport/Visa/Travel Document Requirements

# DS-3053

***PLEASE CONTACT OUR OFFICE FIRST !!!***

**DS-3053: Consent Form required for minors under the age of 16 if one biological parent is not available to sign the application.**

**<https://travel.state.gov/content/travel/en/passports/requirements/forms.html>**





# DS-3053



U.S. Department of State  
**STATEMENT OF CONSENT:**  
**ISSUANCE OF A U.S. PASSPORT TO A MINOR UNDER AGE 16**  
 Attention: Read **WARNING** and **FORM INSTRUCTIONS** on Page 1

OMB CONTROL NO. 1405-0125  
 OMB EXPIRATION DATE: 09-31-2019  
 ESTIMATED BURDEN: 20 MINUTES



U.S. Department of State  
**STATEMENT OF CONSENT:**  
**ISSUANCE OF A U.S. PASSPORT TO A MINOR UNDER AGE 16**

### USE OF THIS FORM

The information collected on this form is used in conjunction with the DS-11, "Application for a U.S. Passport." When a minor under the age of 16 applies for a passport and one of the minor's parents or legal guardians is unavailable at the time the passport is executed, a completed and notarized DS-3053 can be used as the statement of consent. If the required statement is not submitted, the minor may not be eligible to receive a U.S. passport. The required statement may be submitted in other formats provided they meet statutory and regulatory requirements.

### FORM INSTRUCTIONS

- Complete fields 1, 2, and 3. If field 3 is not completed, authorization will be valid for both products.
- Complete field 4, Statement of Consent, only if you are a non-applying parent or guardian consenting to the issuance of a passport for your minor child. NOTE: Your signature must be witnessed and notarized in field 5.
- The written consent from the non-applying parent that accompanies an application for a new U.S. passport must not be more than 90 days old. A clear photocopy of the front and back of the non-applying parent's government-issued photo identification presented to the notary is required with the written consent.
- Please submit this form with your minor child's new DS-11 passport application to any designated acceptance facility, U.S. Passport Agency, U.S. Embassy, or U.S. Consulate abroad.

### SPECIAL REQUIREMENTS FOR INSTITUTIONS/ENTITIES GRANTED GUARDIANSHIP

- Below is a list of special documents you **must** submit with your DS-3053:
- A **certified** order of a court of competent jurisdiction granting guardianship to the institution/entity. (Photocopies are not acceptable.)
  - A signed statement from the institution/entity **on letterhead** authorizing a specific person to apply for a passport for the child on its behalf. The statement must include the minor's name and the name of the individual(s) authorized to apply for the passport.
  - A photocopy of employee identification documents proving the person applying for the minor's passport works at the institution/entity.

Please ensure that all of the above **do NOT have any conditions** placed on the period of validity of the passport or where the minor may travel. If there are conditions in the statement, a new statement of unequivocal consent is required.

**WARNING: False statements made knowingly and willfully on passport applications, including affidavits or other supporting documents submitted therewith, may be punishable by fine and/or imprisonment under U.S. law, including the provisions of 18 U.S.C. 1001, 18 U.S.C. 1542, and/or 18 U.S.C. 1621.**

### FOR INFORMATION AND QUESTIONS

For passport and travel information, please visit our website at [travel.state.gov](http://travel.state.gov). In addition, contact the National Passport Information Center (NPIC) toll-free at 1-877-487-2778 (TDD 1-888-974-7763) or by e-mail at [NPIC@state.gov](mailto:NPIC@state.gov). Customer Service Representatives are available Monday-Friday, 8:00 a.m. - 10:00 p.m. Eastern Standard Time (excluding federal holidays). Automated information is available 24/7.

For information on International Parental Child Abduction, please visit [www.travel.state.gov/childabduction](http://www.travel.state.gov/childabduction) or contact the Office of Children's Issues by telephone at 1-888-407-4747 or by e-mail at [PreventAbduction1@state.gov](mailto:PreventAbduction1@state.gov).

### PRIVACY ACT STATEMENT

**AUTHORITIES:** We are authorized to collect this information by 22 U.S.C. 211a et seq.; 8 U.S.C. 1104; 28 U.S.C. 6039E; Executive Order 11226 (August 5, 1968); and 22 C.F.R. parts 50 and 51.

**PURPOSE:** The primary purpose for soliciting the information is to establish two parent consent for a minor's passport application, as required by Public Law 106-113, Section 236.

**ROUTINE USES:** This information may be disclosed to another domestic government agency, a private contractor, a foreign government agency, or to a private person or private employer in accordance with certain approved routine uses. These routine uses include, but are not limited to, law enforcement activities, employment verification, fraud prevention, border security, counterterrorism, litigation activities, and activities that meet the Secretary of State's responsibility to protect U.S. citizens and non-citizen nationals abroad. More information on the Routine Uses for the system can be found in System of Records Notices State-05, Overseas Citizen Services Records and State-26, Passport Records.

**DISCLOSURE:** Failure to provide the information requested on this form may result in the refusal or denial of a U.S. passport application.

### PAPERWORK REDUCTION ACT STATEMENT

Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time required for searching existing data sources, gathering the necessary data, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: U.S. Department of State, Bureau of Consular Affairs, Passport Services, Office of Legal Affairs and Law Enforcement Liaison, Attn: Forms Officer 44132 Mercure Cir, P.O. Box 1227, Sterling, Virginia 20166-1227.

DS-3053 08-2016

Page 1 of 2

<b>1. MINOR'S NAME</b>			
Last	First	Middle	
<b>2. MINOR'S DATE OF BIRTH</b> (mm/dd/yyyy)		<b>3. THIS AUTHORIZATION IS VALID FOR:</b>	
		<input type="checkbox"/> Passport Book and Card	<input type="checkbox"/> Book Only <input type="checkbox"/> Card Only
<b>4. STATEMENT OF CONSENT</b> To be completed by the non-applying parent or guardian using his/her information when not present at the time the applying parent or guardian submits the minor's application. <b>Statements expire after 90 days.</b>			
I, _____ authorize _____			
Print Name (non-applying parent/guardian)		Print Name (person applying for minor's passport)	
to apply for a United States passport for my minor child named on this application. My consent is unconditional in regards to passport validity and travel.			
Street Address (non-applying parent)		Apartment	City State Zip Code
( )	Telephone Number	E-mail Address	
<b>STOP! YOU MUST SIGN THIS FORM IN FRONT OF A NOTARY.</b>			
OATH: I declare under penalty of perjury that all statements made in this supporting document are true and correct.			
Signature of Non-Applying Parent or Guardian		Date (mm/dd/yyyy)	
<b>NOTE:</b> A clear photocopy of the front and back of the identification you presented to the notary is <b>required</b> with this form.			
<b>5. STATEMENT OF CONSENT NOTARIZATION</b>			
Name of Notary	Print Name (Notary Public)		
Location	City, State		
Commission Expires	Date (mm/dd/yyyy)		
Identification Presented by Non-Applying Parent or Guardian:	<input type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Military ID <input type="checkbox"/> Other (specify) _____		
ID Number:	Place of Issue:		
Issue Date (mm/dd/yyyy):	Expiration Date (mm/dd/yyyy):		
OATH: By signing this document, I certify that I am a licensed notary under laws and regulations of the state or country for which I am performing my notarial duties, that I am not related to the above affiant, that I have personally witnessed him/her sign this document, and that I have properly verified the identity of the affiant by personally viewing the above noted identification document and the matching photocopy.			
Signature of Notary	Date of Notarization		Date (mm/dd/yyyy)

DS-3053 08-2016

Page 2 of 2





# Visa Application

**Not all countries require a visa. The Foreign Clearance Guide will state if a visa is needed.**

**Passport and Visa applications cannot be processed at the same time.**

**Once our office receives the passport, the visa application can be processed.**

**Please contact our office with any questions.**





# Passport Briefing

## Passport/Visa/Travel Document Requirements

# Important Notes

*Applications accepted by appointment only.*

**Passport application process:**

**October - January: 4-6 weeks**

**February - March: 6-8 weeks**

**April – September: 8-11 weeks**

**Visa application process: 1-4 weeks.**

**Processing times are approximate. Unforeseen factors such as workload can directly impact processing times.**







## Contact Information

**Fort Bliss Passport Main Email Inbox:**

**[usarmy.bliss.imcom-central.mbx.fb-passports@mail.mil](mailto:usarmy.bliss.imcom-central.mbx.fb-passports@mail.mil)**

**915-568-1405**

**915-568-3325**

**915-569-7326**

**Address:**

**Pershing Rd., Bldg. 1, Rm 211**

**Fort Bliss 79916**





Questions  
???

Questions  
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# Questions ???

Questions  
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Questions  
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U.S. ARMY



# OUTPROCESSING



## **Out Processing (Installation clearing papers)**

Installation clearing papers can be issued 10 business days (including DONASAS, excluding Federal Holidays) prior to their PCS leave start date.

Phone: (915) 568-2482/7714 or 569-7369/7348

Location: Bldg. 505 Pershing Road, **room 154, MON-WED, 0730-1600, THUR, 0900 TO 1600, FRI, 0730 - 1600**

### **THE FOLLOWING DOCUMENTS ARE REQUIRED IN ORDER TO PICK UP:**

- 1. An Installation PAC Slip (version dated 08/25/2023 – with all required signatures)**
- 2. PCS Orders (with any Amendments if applicable)**
- 3. IPPS-A PCS Absence form**
- 4. Proxy Memo (if you are within 2 days of your leave start date)**

**Final out-processing appointment will be scheduled when Installation clearing papers are issued and will not be scheduled more than 2 business days prior to start of PCS leave.**





U.S. ARMY



# ARMY HOUSING DIVISION



# Army Housing Office (AHO) Housing Flexibility Options

- Soldiers may request flexibility options for government owned/leased Family housing while undergoing a PCS within the United States (including Alaska and Hawaii).
- Soldiers are eligible if they:
  - Have a dependent enrolled in the Exceptional Family Member Program, or at the beginning of the covered relocation period: have a spouse who is gainfully employed or enrolled in a degree, certificate, or license-granting program; have a dependent attending an elementary or secondary school; or are caring for an immediate Family Member with a chronic or long-term illness.
- The covered relocation period begins 180 days before the date of the PCS, which is the date the Soldier leaves the current PDS and ends 180 days after the date of PCS.
- Housing Flexibility Options include:
  - Continuation in Family Housing at the losing PDS during the covered relocation period. Approval cannot adversely affect other Soldiers who arrive at the losing PDS during the relocation period.
  - Early Family Housing eligibility and housing assignment at the gaining PDS for the Family, even if the Soldier has not arrived at the new PDS.
  - Occupancy of Unaccompanied Housing by a Soldier with dependents, at either the losing or gaining PDS, when the Family relocates at a different time than the Soldier. Occupancy is provided on a “space-available” basis and will not displace an eligible Soldier with no dependents.
  - Equitable BAH, when the Family relocates at a different time than the Soldier. BAH may be based on the rate of the gaining PDS, the losing PDS, or the actual location of the Family at the time the Soldier departs.





## Army Housing Office (AHO) Housing Flexibility Options continue:

- Eligible Soldiers can apply for privatized and government-owned/government-leased Family housing while undergoing a PCS.
  - Privatized Family Housing:
    - Soldiers can submit an advance application for housing prior to departing the losing PDS, requesting for Family to be approved to move into housing prior to the Soldier's arrival.
    - Submit housing application, PCS Orders authorizing Family to travel in advance of the Soldier, and DA Form 31 (Request and Authority for Leave) to the Residential Communities Initiative (RCI) project company.
    - Subject to availability of housing and RCI project company approval.
    - Rental rate for assigned housing at the new PDS is determined by new PDS BAH rate.
  - Government-owned/government-leased Family Housing:
    - Soldiers can submit an advance application for placement on the waiting list prior to signing out of the losing PDS.
    - Obtain dependent travel authorization for OCONUS.
    - Submit DD Form 1746 (Application for Assignment to Housing), PCS Orders, and DA Form 31 or DA Form 137-2 (Installation Clearance Record).
  - Consult the Housing Office at the losing PDS on local policies to retain assigned housing after PCS.
- Visit <https://www.housing.army.mil/> for more information on Army Housing





# Army Housing Office (AHO)

Fort Bliss AHO serves as the Military Advocate for all housing matters

AHO staff is employed by the Army to assist Service Members (SM) and their Families with housing matters and advocate on their behalf with community partners/agencies on and off-post

Housing Service Office (HSO) Branch provides referral services and tenant/landlord dispute services for off-post leases

Residential Communities Initiative (RCI) Branch provides oversight of the privatized company, Balfour Beatty Communities (BBC) managing on-post housing and provides tenant/landlord dispute services for on-post leases

Unaccompanied Housing (UH) Branch provides oversight of the Army Barracks Management Program (ABMP)

Army Housing Chief manages the AHO and reports directly to the Director of Public Works and Garrison leadership

Bldg T-0070 Carter Road  
Monday-Friday 0730-1600  
Closed for lunch 1200-1300  
Closed every 3<sup>rd</sup> Thursday 1300-1600  
(915) 568-2898

Email: [usarmy.bliss.id-readiness.mbx.imcom-dpw-housing@army.mil](mailto:usarmy.bliss.id-readiness.mbx.imcom-dpw-housing@army.mil)







## Fort Bliss Family Homes **On-Post Housing**

All Soldiers assigned to Fort Bliss Family Homes must clear their quarters or provide a copy of their scheduled termination appointment prior to receiving the housing clearing stamp

The sponsor or a designated person with POA must come into the Community Management

Office to complete a 30-60 Day notice to vacate (check your lease agreement)

Schedule transportation packing/pick up of your household goods before scheduling your move out

The sponsor or designated person with POA must come to the Community Management Office to schedule, reschedule, or cancel an appointment

These options cannot be handled via telephone





# Army Housing Office (AHO) Off-Post Rental

## Submit termination notice in writing to your property manager/landlord

- 30 days prior to termination
- Attach a copy of orders
- Schedule your pre/final inspection
- Ensure your debt has been cleared with property manager/landlord
- Provide a forwarding address to property manager/landlord
- Security Deposit cannot be used as your last month's rent
- Any damage caused during your tenancy will be deducted from your security deposit and the balance refunded to you
- Security deposits are to be returned to you with 30 days of terminating your lease

## Rental Partnership Program (RPP): Submit an intent to vacate to your property manager (This notice can be picked up from the Army Housing Office)

- 30 days prior to termination
- Attach a copy of your orders
- Schedule your pre/final inspection
- Cancel allotment prior to termination





U.S. ARMY

Q&A





# DPW HOUSING DIVISION

T-0070 Carter Road.  
Fort Bliss, Texas 79916  
(915) 568-2898

Hours of Operation:  
Monday-Friday 0730-1600  
Closed for Lunch 1200-1300 and  
Every 3rd Thursday of the month 1200-1600  
Closed Federal Holidays and weekend

Email: [usarmy.bliss.id-readiness.mbx.imcom-dpw-housing@mail.mil](mailto:usarmy.bliss.id-readiness.mbx.imcom-dpw-housing@mail.mil)





U.S. ARMY



# Army Community Service (ACS)



# Army Community Service

## Army Community Service (ACS)

### Financial Readiness Program

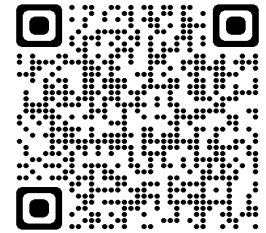
The Army Community Service Financial Readiness Program (FRP) is here to provide free education, counseling and support services, whether this is your first move or the first of many. Let us provide you with the information and resources to navigate your next military move. Same services will be provided at your next location, upon request. Please call (915) 568-4227/8676/4706 or visit the QR code to schedule an appointment before your move.

#### Services Provided:

- One-on-One Appointments (special circumstances)
- Unit Trainings
- Financial Classes
- Financial Workshops
- Financial Readiness Milestones
- Choose “Class Registration”

#### Topics Covered:

- Planning & Budgeting
- Debt Management
- Fundamentals of Banking
- Free Credit Report Review/ Credit Repair
- Security Clearance
- Thrift Savings Plan (Military & Civilian)
- Blended/ Legacy Retirement System
- Car Buying & Insurance
- First-Term PCS “Money & Moving”
- Consumer Issues



<https://bliss.armymwr.com/programs/financial-readiness-program>





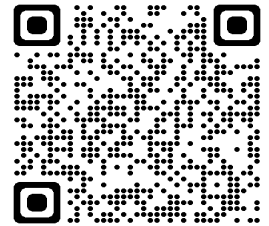
# Army Community Service

## Army Community Service (ACS)

### Army Emergency Relief

The Army Emergency Relief (AER) is the Army's own nonprofit organization dedicated to providing emergency financial assistance to soldiers, retired soldiers, and their families. Please call (915) 568-4227/8676/4706 or visit the QR code if assistance is needed before, during, and after your move.

### Authorized Categories of Assistance



- Emergency Travel
- Rent
- Essential POV Repair
- Auto Repossession
- Funeral Expenses
- Utilities
- Dental (non cosmetic)
- Natural Disaster
- PCS Travel Assistance
- Minor Home Repair
- Repair of HVAC
- Purchase/Repair of Stoves, Refrigerators, Washer and Dryer
- Cranial Helmets
- Replacement Vehicles
- Essential Furniture
- POV Insurance Deductible

**American Red Cross** - (After Duty Hours, Toll Free 1-877-272-7337)

<https://bliss.armymwr.com/programs/financial-readiness-program>





# Army Community Service

## Army Community Service (ACS)

### Relocation Services

- The Army Community Service [Relocation Readiness Program](#) is here to help with a comprehensive support system, whether it's your first move or the last of many. We have an array of information and resources to help you and your family navigate your next military move.
- Your first stop should be your local Army Community Service to meet with a Relocation Readiness Program Manager who can get you started. Bldg 2494 Corner of Carter Rd and Ricker Rd on main post. Call (915) 568-4227

### Services Offered

- Lending Closet
- Information and Referral
- Pre- and Post-Move Counseling
- Relocation Packet Requests
- Waiting Families Group
- Total Army Sponsorship Program
- Citizenship, ESL, Newcomers







# Army Community Service

## **Army Community Service (ACS) Employment Readiness Program**

The [Employment Readiness Program](#) (ERP) provides information and referral services on employment, education, training, transition, and volunteer opportunities to give Family members the competitive edge needed to secure meaningful employment. ERP offers up-to-date information on available employment opportunities, market and job trends, education, and volunteer resources to help individuals make informed decisions when seeking employment. **Please call 915-569-5838 for more information.**

Services offered by the ERP include classes and seminars related to employment:

Job fairs and other hiring events

Resume writing

Interviewing techniques

Dressing for success

Networking

Entrepreneurship

Helpful Websites:

<https://www.armymwr.com/programs-and-services/personal-assistance/employment-readiness-program>

<https://www.armyfamilywebportal.com/content/employment-readiness-program>

<https://www.usajobs.gov>

<https://myseco.militaryonesource.mil>

<https://msepjobs.militaryonesource.mil/msep/>

<https://www.dol.gov/agencies/vets/veterans/military-spouses>





# Army Community Service

## Army Community Service (ACS)

### Exceptional Family Member Program

IAW AR 608-75 it is mandatory for Soldiers to enroll authorized dependents in DEERS with special medical or educational needs into the [Exceptional Family Member Program \(EFMP\)](#). The EFMP is intended to assist the military in ensuring services are available for family members when a Soldier is transferred to a new duty station.

ACS services offered for families enrolled in the EFMP (915) 568-8210/569-5062/569-4227 Option 5

Information and Referral

Education

Links to civilian agencies

Advocacy Support

Respite Care

Support Groups

EFMP Family Activities

Systems Navigation

✓ **Website:** <https://williambeaumont.tricare.mil/clinics/mendoza-center/exceptional-family-member-program>

✓ The following are items that will need to be hand carried to your next duty station:

- Copies of IEP/IFSP for each dependent child enrolled in school/EDIS
- Copies of school transcripts/records for each dependent enrolled in school
- Copies of medical records for self and dependents
- Medication/medical supplies to meet your family's needs until arrival in new community (at least 90 days worth)
- Clearing ACS EFMP
  - No appointment is needed.
- Out-processing Soldiers who have family members enrolled in the EFMP must complete DA Form 7415 and the "Needs Assessment for Relocating Soldiers" form and provide a copy of their orders to EFMP staff.
- Additional assistance and resources are provided as required. In addition, the EFMP staff prepares a memo to the gaining installation informing them of the Soldier's report date and possible need for assistance.
  - EFMP staff pre-clear Soldiers who are not enrolled in the EFMP weekly.



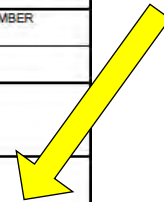


# Army Community Service

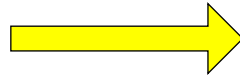
## EFMP Query Sheet DA Form 7415

EXCEPTIONAL FAMILY MEMBER PROGRAM (EFMP) QUERYING SHEET	
For use of this form, see AR 608-75; the proponent agency is ACSIM.	
<b>PRIVACY ACT STATEMENT</b>	
<b>AUTHORITY:</b>	5 USC Section 301, Departmental Regulations; 10 USC 1071-1086; 10 USC Section 3013, Secretary of the Army, and Army Regulation 608-75, EFMP.
<b>PRINCIPAL PURPOSE:</b>	To identify soldiers that have family members for enrollment in the EFMP.
<b>ROUTINE USES:</b>	To federal, state, and local medical agencies in order to provide an exceptional family member with medical treatment when the Department of the Army does not have a suitable treatment facility.
<b>DISCLOSURE:</b>	Disclosure of the requested information is mandatory. Failure to provide the information may result in disciplinary and/or administrative action. Additionally, failure to provide the information may result in an EFM not receiving necessary medical care.
1. NAME OF SOLDIER	2. RANK
3. UNIT current unit	
4a. HOME ADDRESS current home address	b. HOME PHONE NUMBER
5a. DUTY ADDRESS current duty address	b. DUTY PHONE NUMBER
	c. FAX NUMBER
d. EMAIL ADDRESS mail.mil email address	
6. Do you have a family member ( <i>child or adult</i> ) with a physical, emotional, developmental, or intellectual disorder that requires special treatment, therapy, education, training, counseling, equipment, assistance or medical care above the level of a general practitioner? <input type="checkbox"/> YES <input type="checkbox"/> NO	
7. If the answer to the above question is yes, is the family member enrolled in EFMP? <input type="checkbox"/> YES <input type="checkbox"/> NO	
8. The EFMP works with the other military and civilian agencies to provide comprehensive, coordinated community support, educational, housing, personnel, and medical services to families with special needs. Enrollment in EFMP is mandatory and benefits the family by considering medical and special education needs in the military personnel assignment process. Medical needs are considered in the worldwide assignment process whereas special education needs are only considered in overseas assignments.	
9. The above information is true and correct to the best of my knowledge.	
a. SIGNATURE OF SOLDIER	b. DATE SIGNED (YYYYMMDD)

must answer yes or no



must be signed





# Army Community Service

## Exceptional Family Member Program/ EFMP PCS Coordination

**ACS** **ACS EFMP PCS Coordination** **FORT BLISS**

**Authority:** AR 608-75 Exceptional Family Member Program (EFMP)  
**Purpose:** To provide appropriate background information for coordinate location change for Soldiers enrolled in the EFMP.  
**Disclosure:** Voluntary. However, failure to provide the requested information may impede Army Community Service (ACS) personnel from being able to assist individuals effectively.

**Reason for Visit:**  In-Processing  Out-Processing

Sponsor Name: \_\_\_\_\_ Rank: \_\_\_\_\_ DOB: \_\_\_\_\_  
 Email: \_\_\_\_\_ Contact Number: \_\_\_\_\_  
 Spouse Name: \_\_\_\_\_  
 Spouse Contact Number: \_\_\_\_\_ Spouse Email: \_\_\_\_\_  
 Gaining Installation \_\_\_\_\_ Report Date: \_\_\_\_\_  
 Will your Family be accompanying you to the new duty station?  Yes  No  
 If not, what installation will they be closest to? \_\_\_\_\_

**If applicable, it is highly suggested that you obtain/hand carry the following:**

- Copies of Child Youth and Services (CYS) program documentation for each child.
- Copies of school transcripts/records for each dependent enrolled in school to include Special Education Records or Individualized Education Plan (IEP) / Individualized Family Service Plan (IFSP)
- Copies of medical records for self and dependents.
- Medication/medical supplies to meet your Family's needs for 90 days.

**The Family requests assistance from the gaining installation in the following areas:  
 (X) in the area(s) that apply to you.**

Child, Youth & Services (CYS)  Community Recreation  
 EFMP Respite Care Information  EFMP Systems Navigation  
 Housing Modifications/Accommodations  Medical and/or Counseling Services  
 Special Education or School Liaison Office  Support Groups  
 No support requested at this time  Other: \_\_\_\_\_

**List ALL enrolled Exceptional Family Members:**

Name:	DOB:	Please circle reason for enrollment:
		Medical or Educational
		Medical or Educational
		Medical or Educational

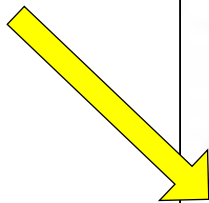
**AUTHORITY:** 5 USC Section 301, Department regulations; 10 USC Section 3013, secretary of the Army; army regulation 608-1, Army Community Service Center.  
**PRINCIPLE PURPOSE:** To provide appropriate background information for coordinated location change for Soldiers enrolled in the Exceptional Family member Program.  
**DISCLOSURE:** Voluntary. However, failure to provide the requested information may impede Army community Service personnel from being able to assist individuals effectively.

I, the Sponsor, hereby authorize the release of my information to EFMP, CYS, the MTF and the gaining installation's Army Community Service Directorates.

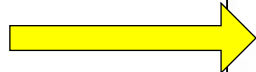
Signature of Sponsor: \_\_\_\_\_ Date: \_\_\_\_\_

Revised 7 June 2015 71000.5

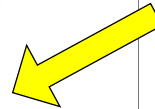
List all enrolled Family members



must be signed



Check services or info you are looking for at your new duty station





# Army Community Service

- **Exceptional Family Member Program**

- **Army Community Service EFMP**

- **Information and Referral**

- **Education**
- **Links to civilian agencies**
- **Advocacy Support**
- **Respite Care**
- **Support Groups**
- **EFMP Family Activities**
- **Systems Navigation**
- **Transfer and Continuity of Services**





# Army Community Service

## Exceptional Family Member Program

### Army Community Service EFMP

What to bring with you during PCS?

- **Copies of IEP/IFSP or 504 plan for each dependent child enrolled in school/EDIS**
- **Copies of school transcripts/records for each dependent enrolled in school**
- **Copies of medical records for self & dependents**
- **Copies of EFMP forms (summary sheet, DD2792 or DD2792-1)**
- **Medication/medical supplies to meet your Family's needs until arrival in new community (recommended 90 days worth)**





# Army Community Service

- **Exceptional Family Member Program**
  - **Contact Information**
- **Army Community Service EFMP Office**
  - **Walk-ins or Appointments**
  - **Bldg. 2494 Ricker Road**
  - **915-569-4227 option 1**





U.S. ARMY



# FORT BLISS TRANSPORTATION





# FORT BLISS OCONUS LEVY BRIEF

## Household Goods Shipment

- In order to arrange for shipment of your household goods, all service members must self counsel and perform the following once they receive their orders to facilitate their household goods pick up:
  - (1) Go to <https://www.militaryonesource.mil>
  - (2) Click on log into DPS, DOD Security Banner – Accept
  - (3) Customer - EITHER Register as a Customer or Log in with Certificate
  - (4) Make your transportation arrangements
  - (5) Print out and sign the DD forms generated by DPS
  - (6) After completing self counseling:
    - Bring a copy of your PCS orders with any amendments,
    - DD 1299, and DD 1797 to the Transportation Office. Telephone number is (915) 568-3102 or (915) 568-5951 or (915) 568-3668.
- You must schedule your pack dates within 7-10 business days after your self counsel.
- Spouses will require a power of attorney (POA) to submit paperwork and question status of any and all shipment(s). **NO EXCEPTIONS!**





U.S. ARMY

# FORT BLISS OCONUS LEVY

## PCS and NTS Weight Allowance (Pounds)

Grade NOTE 1/NOTE 3	With Dependents NOTE 2	Without Dependents
<b>Officer Personnel</b>		
0-10 to 0-6	18,000	18,000
0-5/W-5	17,500	16,000
0-4/W-4	17,000	14,000
0-3/W-3	14,500	13,000
0-2/W-2	13,500	12,500
0-1/W-1/Service Academy Graduates	12,000	10,000
<b>Enlisted Personnel</b>		
E-9	15,000 <b>Note 4</b>	13,000 <b>Note 4</b>
E-8	14,000	12,000
E-7	13,000	11,000
E-6	11,000	8,000
E-5	9,000	7,000
E-4	8,000	7,000
E-3 to E-1	8,000	5,000
Aviation Cadets	8,000	7,000
Service Academy Cadets/Midshipmen		350





# FORT BLISS OCONUS LEVY BRIEF

## Shipment Transit Times

- **Asian Continent**
  - **HHG 80-100 days**
  - **UB 60-90 days**
  
- **European Continent**
  - **HHG 80-100 days**
  - **UB 60-90 days**





# FORT BLISS OCONUS LEVY BRIEF

## Packing

- Areas being packed must be clean and free of trash/debris.
- Any boxes that have been previously packed, containers and foot lockers, etc. should remain open to verify contents. If need be, contents will be re-packed based on carrier responsibility and government requirement.
- Motorcycles may not always be authorized to ship. If you cannot ship, you may store. You will be required to provide proof of ownership; title or registration....NO EXCEPTIONS.
- Weapons may not always be authorized to ship. If you cannot ship, you may store. You will be required to provide weapons registration....NO EXCEPTIONS.

### NOTE:

- *If the area/residence is not clean, the company has the right to refuse your movement.*





# FORT BLISS OCONUS LEVY BRIEF

## Shipment of POV

- In general if you are traveling overseas (OCONUS), the government will pay to ship one POV to your new location, but you will need to arrange for it to be dropped off at the designated drop-off center before departing.

***NOTE:*** There may be some overseas bases such as Japan, where it is not possible to have a car. In these cases, the government will pay to store your POV stateside for the length of your tour.

- Privately owned vehicle shipments and storage arrangements can be scheduled at:

[www.pcsmypov.com](http://www.pcsmypov.com)

- If you are authorized to ship your POV, the entitlement must be on your PCS orders. You are only entitled per diem from your current duty station to the authorized designated vehicle processing center (VPC) For Fort Bliss this will be the VPC in Grapevine, Texas.





# FORT BLISS OCONUS LEVY BRIEF

## Storage of POV

- If you cannot ship your POV you are entitled to store at the servicing VPC or you can self store.

**\*Self storing means you arrange your own storage company and pay for the storage for the duration of your overseas tour.**

**\*Upon return to CONUS you are entitled to get reimbursed what the government would have paid to store your POV.**

**NOTE: Strongly suggest storing at the servicing VPC.**

- If you receive a Continuous Overseas Tour (COT) order entitling you to ship your car you are able to ship from the VPC center.

**NOTE: There is no entitlement to pick up a vehicle from a third-party storage facility.**





U.S. ARMY



# Transportation – OCONUS Levy Brief

## Fort Bliss Official Travel Office

AFSBn-BLISS

# HOURS OF OPERATION



Monday thru Wednesday & Friday

0730 – 1600

Thursday 1000 – 1600

**CLOSED** Everyday for Lunch 1200 – 1300

Ticket Exchanges 0800-1130 & 1300-1430

Located in BLDG 504A,  
Room 209, 2<sup>nd</sup> floor

(915) 568-6904/1270







# SCHEDULING OCONUS AIR TRAVEL

## OCONUS TRAVEL:

As per the orders, we are authorized to book your travel between your “AVAIL” date (which is on the last page of orders) to the Report date.

01

1 Copy of PCS orders and Absence Request (if you are taking personal leave in OCONUS before your report date) and **NATO orders** (if applicable)

02

If taking dependents: Deps. names need to be on PCS Orders w/Concurrent Travel Authorized and any one of the following numbers for them: DOD ID or Passport

03

Orders will reflect type of payment used for booking the travel. IBA/GTCC holders must have their card active and in mission critical status (S-3/S-4 can assist)

04

If required for your new PDS, a No Fee Passport. Please contact the Passport office for more guidance.

PASSPORTS

FORM OF PAYMENT

DEPS ON ORDERS/INFO

ORDERS





## WHAT ARE PORT CALLS?

Port calls are flights on the AMC Patriot Express, also known as the “Rotator”. It is a Department of Defense (DoD) contracted commercial charter flight which provides international support to travelers on official duty and their families.

### If you traveling to: Japan, Korea, or Guam via Patriot Express

- Port of Embarkation: Seattle, WA (SEA)  
-Commercial flight to SEA from El Paso

### If you traveling to: Germany/Kuwait/Qatar/Turkey (Some locations in Italy/Spain) via Patriot Express

- Port of Embarkation: Baltimore, MD (BWI)  
-Commercial flight to BWI from El Paso

### If you traveling to: Africa, Cuba (Some locations in Italy/Spain) via Patriot Express

- Port of Embarkation: Norfolk, VA (ORF)  
-Commercial flight to ORF from El Paso

### If you traveling to: Hawaii & Alaska

- No Port of Embarkation  
-Commercial flight all the way from El Paso





# FLYING FROM A VEHICLE PROCESSING CENTER (VPC)

**Every person authorized to flying to new PCS location are only authorized to fly from old duty station to new duty station.**

You are only authorized to fly out of El Paso unless you have a PME waiver or are relocating dependent(s). It *must* be stated on the orders if you are.



## **Dallas VPC**

Everyone PCSing OCONUS is authorized to fly out of Dallas International Airport because it is the nearest Vehicle Processing Center to Fort Bliss, Texas.

## **LAX VPC**

Is authorized if you are PCSing to Hawaii, Alaska, or taking the Port Call out of Seattle, you are then also authorized to fly from Los Angeles International Airport. However, you will only be reimbursed the mileage/per diem as if you were going to the Dallas VPC.





## DALLAS IS FORT BLISS' AUTHORIZED VEHICLE PROCESSING CENTER (VPC)

### Hours of Operation

0800 - 1600  
Monday-Friday

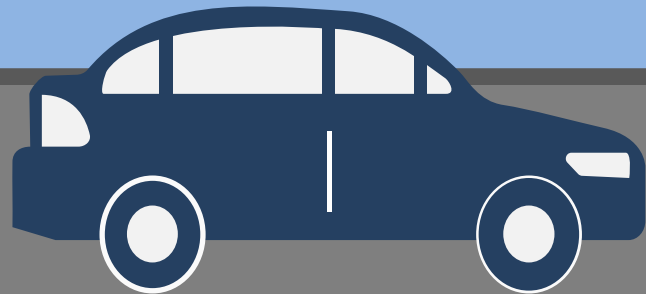
### Address

957 Heinz Way  
Grand Prairie, TX  
75051

### Contact

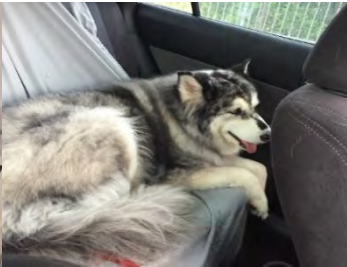
Local: 469-203-8629  
Toll Free: 855-389-9499  
Fax: 972-639-3976

- CLOSED ON WEEKENDS AND ALL FEDERAL HOLIDAYS
- LAST VEHICLE IS ACCEPTED FOR IN/OUT PROCESSING NO LATER THAN 1600
- Please contact your respective VPC if you have any questions or require additional information concerning your vehicle.
- WEBSITE TO BOOK APPOINTMENT AND FOR ALL OTHER VPCs: [www.pcsmypov.com](http://www.pcsmypov.com)





# TICKETING PETS TRAVEL



To increase success in booking pets aboard the PE, please come/email us immediately when you have received a **report date RFO message**. We can reserve a spot on the Patriot Express with that but cannot finalize the travel until we have your official orders.

- It can cost up to \$375 (per pet) to fly them aboard the Patriot Express (PE)
- PE only has 10 belly slots per aircraft
- A family may only request up to 2 pet slots
- Pet(s) cannot exceed 150 lbs. with Kennel
- We do not book the pet's commercial flight to the Port Call or for any other CONUS travel

however, we will request SATO to book a commercial reservation, then you must call the airline to book your pet aboard that flight.

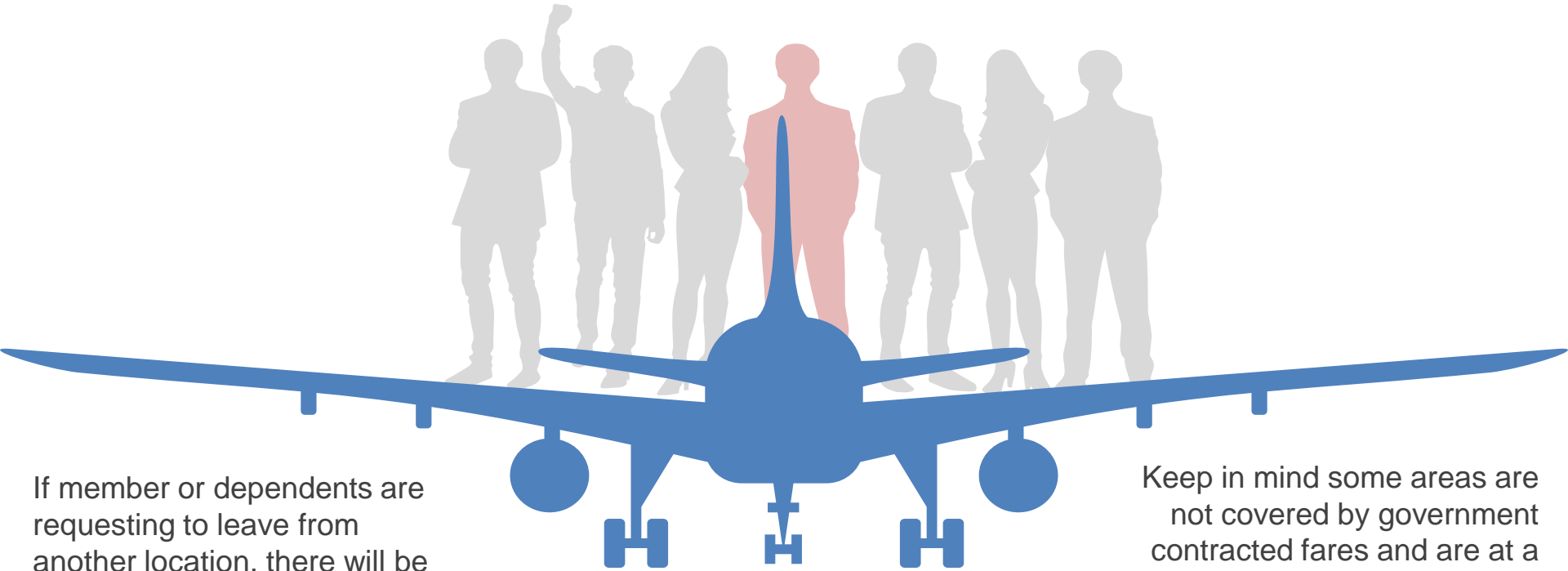
- The most up to date DTR Chapter 103, paragraph K.d states; if we can't book your pet aboard the PE, we can now give you a statement of non-availability to fly commercially to your OCONUS location.
- Pet authorization must be included on your orders.





# TICKET EXCHANGE PROGRAM

Official travel is authorized travel from El Paso or from another authorized location (i.e. family relocation) to your newly assigned duty station. To arrive or depart from any other location will call for a Ticket Exchange.



If member or dependents are requesting to leave from another location, there will be an “Exchange Processing Fee” of \$35.00 plus any additional cost (if any) that extends over the cost of the Government ticket per ticket.

## Payment

Exchange fee/difference in airfare must be paid at the time of ticketing and on the member’s personal credit/debit card.

Keep in mind some areas are not covered by government contracted fares and are at a much higher rate and/or international airlines flights may not be available with the same carrier to do the exchange with.





## FLIGHT NOTES

- 01 Before booking travel, read your orders to understand what you are authorized.
- 02 Understand the form of payment needed to make travel arrangements.
- 03 Book tickets with us before going on leave.
- 04 Your orders will direct you to purchase your airfare tickets at your local ITO (Installation Transportation Office), which is here at bldg. 504A. If you don't, you may not be reimbursed any or all of the ticket purchased amount.





U.S. ARMY



# EXCEPTIONAL FAMILY MEMBER PROGRAM (EFMP)





## ***Exceptional Family Member Program (EFMP) / Overseas Family Member Travel Screening (FMTS)***

- ✓ AR 608-75 (Exceptional Family Member Program) requires that Soldiers enroll all DEERS beneficiaries who have special medical or educational needs into the EFMP. The EFMP is intended to ensure the Army PCS Family members only to duty stations where care is known to be available.
- ✓ In many overseas locations, the Army also considers the availability of host nation health care in the decision. Family member travel may be denied when a Soldier has a Family member with special needs and the services to meet those needs are unavailable at the overseas location. When Family travel is denied, Soldiers may request a deletion from the assignment or serve an unaccompanied tour.
- ✓ Soldiers enrolled in the program are responsible for updating EFMP enrollment information every 3 years, or upon changes in their dependent's needed services, whichever occurs first.
- ✓ EFMP does not expire; failure to update enrollment every 3 years results in a delinquent status notification to the command, which will interfere with release of PCS orders.
- ✓ **Enrollment update to be completed online at <https://efmp.army.mil>.**





## ***Exceptional Family Member Program / Overseas Family Member Travel Screening (FMTS)***

- ✓ Process of screening Family members
- Soldiers already enrolled in EFMP when considered for reassignment have their potential assignments pre-screened for EFMP support as part of the initial HRC assignment process.
- All Soldiers, whether enrolled in EFMP or not, on assignment to OCONUS, to include Alaska and Hawaii, who elect an accompanied tour (with dependents) are required to have every authorized dependent who is going overseas complete Family Member Travel Screening (FMTS).
- **FMTS must be initiated immediately at <https://efmp.army.mil>.**
- ❖ If a Family member has a medical/mental health condition that warrants being seen by a specialist or by their primary care provider more than once a year, a DD Form 2792 (Family Member Medical Summary) is completed by their provider to address their medical conditions.
- ❖ If a Family member has an Individualized Education Plan (IEP), a DD Form 2792-1 (Special Education/Early Intervention Summary) is completed by the school.
- ❖ If an infant receives services through an Early Childhood Intervention (ECI) program, a DD Form 2792-1, is completed by ECI, along with a copy of their evaluation/IFSP (Individualized Family Service Plan).





## ***Exceptional Family Member Program / Overseas Family Member Travel Screening***

- ✓ The losing Reassignment Processing Center submits all FMTS documents via <https://efmp.army.mil>, to the gaining installation to determine if Family members can be supported. Determination at the gaining installation can take more than 30 days. PCS orders will be published upon receipt of Family travel decision.
- ✓ Families in Remote Areas (Not Near MTF) in CONUS, should refer to the AMEDD EFMP website at <https://efmp.amedd.army.mil/tools/contacts.html> for instructions on who to contact for assistance with FMTS.
- ✓ Military special needs Families with situations requiring extensive PCS move medical support may qualify for special conveyance air transport (air ambulance).

The following are some situations that may qualify:

- **Ventilator-dependent Family member**
- **Family member must travel with around the clock medical care/support**
- **Family member must travel with special medical equipment/DME**
- **Family member cannot travel via POC or commercial air**
- **Other than economy/coach accommodations are required**

**NOTE: Office of the Surgeon General (OTSG), EFMP Office, must approve each case, and provide order amendment language to the servicing reassignments processing center.**





## Contact Information

References:

- AR 608-75 (Exceptional Family Member Program)

William Beaumont Army Medical Center  
EFMP office

Mendoza Family Care Clinic  
Building 11335 SSG Sims Rd  
Fort Bliss, Tx 79918

Office: 915-742-3715

Fax: 915-742-9333

E-mail: [usarmy.bliss.medcom-wbamc.mbx.efmp@health.mil](mailto:usarmy.bliss.medcom-wbamc.mbx.efmp@health.mil)

Hours of Operation:

Mon- Thu: 0730-1530

Closed for lunch 1200-1300

Closed to patient walk-in's every Friday with reduced  
telephone and email support.





U.S. ARMY



# ARMY MILITARY PAY OFFICE



# ARMY MILITARY PAY OFFICE



**IN/OUT PROCESSING LOCATION:**



**Soldier Support Center, BLDG 505**

**Room 129**

**HOURS: M-W&F 0900-1200 & 1300-1600**

**THUR: 1200-1500**

**MAIN FINANCE OFFICE**

**BLDG 2 Sheridan Rd**





# ARMY MILITARY PAY OFFICE



## AGENDA



- **PER DIEM RATES / DLA**
- **DEPENDENT TRAVEL / VPC - POV**
- **TLE / TLA**
- **PERMISSIVE TDY**
- **PPM/DITY MOVES**
- **GTCC IBA / CBA**
- **TRAVEL ADVANCE / ADVANCE PAY**
- **BAH**
- **FINANCE LINKS**





# ARMY MILITARY PAY OFFICE



## TRAVEL PAY PER DIEM BY POV

**Per Authorized  
Travel Day \***

- **Soldier** **\$166.00**
- **Dependent(s) age 12 and older** **\$124.50**
- **Dependent(s) age 11 and under** **\$ 83.00**

**\* Authorized Travel is 350 Miles = one day**







# ARMY MILITARY PAY OFFICE



## TRAVEL PAY PER DIEM BY AIRPLANE



- **Soldier** **\$44.25**
- **Dependent(s) age 12 and older** **\$29.50**
- **Dependent(s) age 11 and under** **\$14.75**

**\* 1 Day of Air Travel Authorized for CONUS travel**

**\* 2 Days of Air Travel Authorized to overseas locations**





# ARMY MILITARY PAY OFFICE



## GSA City Pair Fare Program

IAW JTR, Chap. 2: Standard Travel and Transportation Allowances  
- “The GSA City Pair Program is a contract between the Government and certain airlines for routes frequently traveled for Government business. The program requires a traveler to use these routes when they are available. City Pair Program fares are for official travel only and cannot be used for travel to or from leave points or for any portion of a route traveled for personal convenience.”





# ARMY MILITARY PAY OFFICE



## TRAVEL PAY MILEAGE RATES FOR AUTHORIZED TRAVEL BY POV

- **Monetary Allowance in Lieu of Transportation (MALT):**
- MALT is based on the official distance in par. 020204, when traveling on a PCS order between any official points. Current rate as of October 2023: \$0.21 per mile (up to 2 vehicles).

**Effective 1 October 2023**





# ARMY MILITARY PAY OFFICE



## DISLOCATION ALLOWANCE (DLA)

**DLA defrays the costs of relocating to the new PDS**

- **Members with authorized dependents are entitled to DLA at the with dependent rate & the dependents authorization to relocate must be included in PCS orders**
- **Dual Military – only one member will be entitled to DLA**
- **To claim DLA, complete DD Form 1351-2 and submit PCS orders to your gaining Finance Office**
- **For DLA rates go to <http://www.defensetravel.dod.mil>**





# ARMY MILITARY PAY OFFICE



## Dependent Travel/DLA & POV Drop Off - VPC



- **Dependents who travel separately from sponsor to a designated location (other than member's new PDS) must be authorized and directed in the PCS orders. Sponsor must file a separate dependent/DLA travel voucher (DD Form 1351-2) with the gaining Finance Office.**
- **POV drop off at authorized designated VPC (Vehicle Processing Center) locations.**





# ARMY MILITARY PAY OFFICE



## TEMPORARY LODGING EXPENSE (TLE)



- **CONUS entitlement based on current Locality Rate**
- **CONUS to CONUS moves – allowed up to 14 days**
  - **may be split between losing and gaining duty station for dependents authorized to relocate to new PDS.**
- **CONUS to OCONUS moves - allowed up to 7 days MAX at losing duty station (Fort Bliss, TX)**
- **TLE must be claimed at the gaining Finance Office**





# ARMY MILITARY PAY OFFICE



## TEMPORARY LODGING EXPENSE (TLE) (continued)



- **Following documents are needed when submitting your TLE Claim:**
  - **original paid lodging receipt with a zero balance**
  - **a full set of your PCS orders (front/back/amends)**
  - **completed DD Form 1351-2 (travel voucher)**
  - **Copy of Absence Request with sign in date**
- **No advances authorized for this entitlement**





# ARMY MILITARY PAY OFFICE



## **Travel Pay Temporary Lodging Allowance (TLA)**



- **Overseas entitlement only**
- **Payable through overseas Finance Office location**
- **Must have prior approval from Housing Services Office at overseas location**
- **Authorized in 10 day increments at new PDS**
- **No advances authorized for TLA**







# ARMY MILITARY PAY OFFICE



## Pet Reimbursement



- As of **Jan 2024**:
- **1 Pet per PCS Household (Cat or Dog):**
  - **\$550 CONUS (max)**
  - **\$2000 OCONUS (max)**
- **To Claim:**
  - **Pet Authorization must be included in the orders or on amended orders.**
  - **Must have a valid paid receipt.**
  - **Credit card or bank statements are not acceptable as receipts.**





# ARMY MILITARY PAY OFFICE



## Out Processing Brief

### TRAVEL NOTE

### PERMISSIVE TDY (PTDY)



- **Up to 10 days of non-chargeable leave in order to relocate household to new PDS.**
- **No longer required to report to the Housing Service Office for Housing Stamp – CONUS to CONUS only.**
- **If you are authorized House Hunting / PTDY, you MUST submit your IPPS-A Absence Request approved by the first O-5/LTC in the SM Chain of Command (BLK 13) ONLY ON IPPS-A. IAW AR 600-8-10.**





# ARMY MILITARY PAY OFFICE



## PPMs/Do-It-Yourself (DITY) Move



- **Transportation will provide needed information and/or documentation in order for DITY/PPM claim to be paid by DFAS-Rome**
- **Transportation is located in Building 504, 1<sup>st</sup> floor @ (915)568-3668/3338**
- **Transportation (only) will process your request for PPM/DITY advance and/or settlement claims**





# ARMY MILITARY PAY OFFICE



**If you are a Government Travel Charge Card holder, you cannot request an advance for travel – no exceptions!**

**(Per Diem/Mileage)**

**Ensure your card is in “Mission Critical” status through your unit GTA representative prior to your departure.**

**IBA – Individually Billed Account**





# ARMY MILITARY PAY OFFICE



## Travel Pay Advance if not GTC holder



- Travel advances will be paid at 80% of PCS Travel Allowances for Per Diem &/or mileage.
- DLA paid at 100% rate
- Complete the advance form or complete via Smartvoucher and attach a complete set of orders, amendments, and Absence Request can be submitted **up to 20 days prior to sign out date**
- Advance will be calculated based on the mode of travel and dependent information provided on the Travel Advance Request form
- All payments are processed by DFAS-Rome and paid directly into the account for Travel on your *MyPay* web site

**CBA CENTRALLY BILLED ACCT**





# ARMY MILITARY PAY OFFICE



## DLA Advance if GTCC holder



- **DLA paid at 100% rate**
- **Complete the advance form OR complete advance DLA via smartvoucher and attach a complete set of orders, amendments, and Absence Request can be submitted **up to 30 days prior to sign out date****
- **Advance will be calculated based on the dependent information provided on the Travel Advance Request form**
- **All payments are processed by DFAS-Rome and paid directly into the account for Travel on your *MyPay* web site**





# ARMY MILITARY PAY OFFICE



## Military Pay - Advance of Basic Pay



- **1 month of Basic Pay minus Federal taxes, deductions, collections, gov't loans, and all other debts**
- **Can be requested from old PDS, or en route to gaining installation, or upon arrival at your new PDS**
- **Expenses must relate to PCS costs not covered by other advance payments such as: Travel/DLA/PPM**





# ARMY MILITARY PAY OFFICE



## Military Pay - Advance of Basic Pay



- **Submit your Advance Pay request (DD Form 2560),  
Absence Request, & PCS orders to the Soldier Support Center  
Bldg 505 RM 129**
- **Example of how Advance Pay is computed:**
  - **Basic Pay** **\$6,000.00**
  - **Minus all deductions on LES** **\$600.00**
  - **Total Advance Pay** **\$5,400.00**
- **Advance will be released 3 – 5 business days once the  
payment is approved by AMPO**







# ARMY MILITARY PAY OFFICE



## **Military Pay – Requesting Advance of Basic Pay**



- **All Married Soldiers & Dual Military member claiming w/dependent rate BAH:**
  - **Itemization/explanation not required on the form**
- **Single SSGs and above & Dual Military member claiming w/out dependent rate BAH:**
  - **Must itemize PCS related expenses**
  - **Per AR 37-104-4, you must justify PCS related expenses**





# ARMY MILITARY PAY OFFICE



## Military Pay

### **Basic Allowance for Housing (BAH)**

- **BAH is paid at the Fort Bliss rate while on PCS leave up to the report date of the new PDS.**
- **Balfour Beatty Housing is “Privatized” (Contractor) Housing paid by you to them through an allotment. Balfour Beatty will stop the housing allotment effective the date you clear/terminate their quarters. Finance does not stop allotments for the privatized housing.**





# ARMY MILITARY PAY OFFICE



## Military Pay

## Basic Allowance for Housing (BAH)



### PCS BAH

- **Paid to Soldiers who were residing in the barracks - you will receive BAH at the without dependent rate for Fort Bliss while on PCS leave**
- **Soldiers receiving BAH-Diff are entitled to receive BAH at the with dependent rate (must have Birth certificate(s) and DA Form 5960 completed appropriately)**





# ARMY MILITARY PAY OFFICE



## FINANCE WEBSITES



- <http://www.dfas.mil> for:
  - general questions relating to Military and Travel Pay as well as other useful information plus access to the *myPay* web site
- Go to <http://www.defensetravel.dod.mil> for:
  - BAH rates for your new location
  - COLA rates for OCONUS
  - DLA rates
  - Per Diem rates
  - Computation of TLE and TLA





# DEFENSE MILITARY PAY OFFICE



# QUESTIONS

