

# Request for Student Funded Travel

References: AR 55-46 & JTR 050816

## **STUDENTS INFORMATION**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Name of College or University: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

Unaccompanied Baggage Shipment: Yes      No      If yes, provide pick-up address

Storage: Yes      No      If yes, provide pick-up address

Pick-Up Address: \_\_\_\_\_

Student Phone Number (for UB or Storage pick-up): \_\_\_\_\_

Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_ One Way: \_\_\_\_\_

Travel From: \_\_\_\_\_ Travel To: \_\_\_\_\_ Round Trip: \_\_\_\_\_

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## **SPONSOR'S INFORMATION**

Rank and Name: \_\_\_\_\_ Phone DSN: \_\_\_\_\_

Unit Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Do you have a Government Travel Charge Card: Yes      No

Office Symbol: \_\_\_\_\_

Has the above dependent used SFT during this tour? Yes      No

Location of last SFT: \_\_\_\_\_ Date of last SFT: \_\_\_\_\_

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## **The following documents are provided to verify my dependents eligible for SFT**

PCS order to Korea w/ student dependent name(s) listed.

CSP orders with any amendments and transfer memo, if applicable.

Current course scheduled, showing student is currently enrolled.

Letter of acceptance (for student who will be attending school, they must be within 90 days of their school start).

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I CERTIFY THAT THE ABOVE NAMED DEPENDENT IS A LEGAL DEPENDENT OF MINE, IS A FULL TIME COLLEGE STUDENT IN A FOUR YEAR DEGREE COLLEGE PROGRAM, AND IS UNDER 23 YEARS OF AGE.

Soldier's signature: \_\_\_\_\_

S1 Representative's signature: \_\_\_\_\_

Submit this form to:  
usarmy.humphreys.id-pacific.mbx.mpd-s1@mail.mil