Instructions using Adobe Pro DC to complete this form digitally.

- 1) Open the document.
- 2) Review and read the content of the form first before initialing or signing.
- 3) Once complete and ready to sign, select "Tools" in the menu bar.
- 4) Select "Fill & Sign"

5) You will see a picture of a pen with "Sign" next to it, click it and select "add initial" first. Once you do this it will be set on that computer. You then place the digital initials in the required locations within the document.

- 6) Repeat step 5 except choose "Add Signature"
- 7) Add with the Add Text for the Printed name and Date.
- 8) Save the document and add it to your Levy Packet.



DEPARTMENT OF THE ARMY UNITED STATES ARMY REGIONAL HEALTH COMMAND EUROPE UNIT 29421 APO AE 09136-9421

MCEU-CLE

29 November 2017

MEMORANDUM FOR Regional Health Commander Europe, Exceptional Family member Program (EFMP), APO AE 09042

SUBJECT: Acknowledgement of Documents Submitted for Family Travel by Service Member (SM)

1. The EFMP Office completing the documents in the originating OCONUS Screening (OSS) Office, RHCE EFMP is the gaining EFMP office. All information is both the OSS and Family Member medical records will be used in the Family Travel review process to make recommendations on the availability of care in assignment locations. SM and Family is responsible for reviewing the completeness and accuracy of the information and recommendations in the Family Members file. _____(SM Initials)

2. If there are changes to medical or educational information it is the SM's responsibility to inform the originating office. _____(SM Initials)

3. If Family Travel is approved, medical care may be provided by host nation providers. Local provider(s) may revise the beneficiary's treatment plan, so current treatment may not be continued in the overseas environment. Additionally, there may be some cultural and language barriers associated with receiving care on the local economy that could impact the sponsor/patient's expectation of care. _____(SM Initials)

4. The EFMP Office that completes the OSS holds the responsibility of reviewing all the forms with the Family/SM, for providing guidance in reference to a reconsideration, and/or updating medical information.____(SM Initials).

5. If a SM receives a Family Travel denial message they should contact their personnel office and branch manager for assignment options. Medical information questions will be referred to, the point of contact in the office that completed the OSS.____(SM Initials)

6. I have read and understand these instruction and the instruction for DD For 2792. In accordance with AR 608-75, Soldiers who knowingly and willfully disregard or provide false information might be subject to the Uniform Code of Military Justice (UCMJ, Art. 92 and Art.107)._____(SM Initials)

7. Point of contact for this memorandum is the EFMP Office that completed the OSS.

Service Member's Printed Name

Signature

Date