		; the proponent agency			
	PRIVACY ACT	STATEMENT			
AUTHORITY: 10 USC 136, Under Secretary of 600-8-101, Personnel Readines		nnel and Readiness; 1	0 USC 7013, Seci	etary of the Army	; and AR
PRINCIPAL PURPOSE: To provide a standardized mean deployment. For additional inform (APS) <u>https://dpcld.defense.gov</u>	mation see the Syst	tem of Records Notice	A0600-8-104 AHF	RC, Army Personi	
ROUTINE USES: There are no specific routine use routine uses identified in the sys	es anticipated for th	is form; however, it ma	ay be subject to a r	number of proper	and necessary
DISCLOSURE: Disclosure of this information is processing time and DCS status		failure to update and	confirm information	n is correct may i	npede
1. NAME (Last, First, Middle)	2. RANK/GRADE	3. UNIT NAME, PHO	NE NUMBER	4. UIC	
5. DOB (YYYYMMDD) 8. COMPONENT 9. DEPLOYMENT AC SRP USAR Yes 6. MOS 7. ASI ARNG No	10. DEPLOYMENT COUNTRY	11. DEPLOYMENT TYPE Unit Individual			5. DATE (YYYYMMDD)
SECTION 1 (UNI	T)		STATUS	CERTIFIED BY (INITIALS)	DATE (YYYYMMDD)
PERSONNEL			DEPL	OYMENT VALID	· /
1. DD Form 93, Record of Emergency Data - Review and	update.				
2. SGLV Form 8286, SGLV Form 8286A, and FSGLI - Re	eview and update.				
3. ID tags (two tag sets with chains) on hand.					
4. Medical warning tags on hand as required.	4. Medical warning tags on hand as required.				
5. Common access card on hand.					
 Verify expiration of term of service/expiration of service agreement date is not within required return from deployment period. 					
 Verify Soldier's MRC code(s); MAR2 complete for perm required. 	nanent physical pro	files 3 or 4 as			
8. Conscientious objector status: pending/none = ready,	approved = duty res	striction.			
9. BT/AIT or equivalent training completed (includes BOL	C, WOBC).				
10. Digital photograph on file (must be a head shot, 4 mega pixel or higher).					
11. Sole surviving son or daughter (waiverable).					
12. Turkish or German citizenship deploying through/to that country.					
13. Former Peace Corps member (for deployment country only).					
14. Former hostage/POW in deployment area (waiverable).					
15. Mother of newborn, single parent, or dual military in adoption process waiver approved (first 12 months).					
16. DA Form 5305, Family Care Plan - Approved, if required.					
17. Soldier for Life - Transition Assistance required? Yes No. If yes, is Soldier's Individual Transition Plan (DD Form 2648 & DD Form 2648-1) complete? Yes No					
18. PERSTEMPO days and input into PERSTEMPO web	site for all deployme	ent.			
19. Age 18 standard for participation in combat.					
20. Passport or Visa in possession, if required.					
21. DD Form 2760, Qualification to Possess Firearms or Ammunitions - Lautenberg Amendment.					
22. Domestic violence investigation pending (weapon pro	nidition).				
23. Provost Marshall records check.					
U.S. ARMY RESERVE/ARMY NATIONAL GUARD ONLY		DEPL			
24. All previous discharge certificates (DD Form 214s or DD Form 220s), if applicable.					
25. Mobilization orders.					

14. NAME (Last, First, Middle)	15. RANK/GRADE	16. UNIT NAME, PHO	NE NUMBER		17. UIC
SECTION 1 (UNIT) (Continued)		STATUS	CERTIFIED BY (INITIALS)	DATE (YYYYMMDD)	
LOGISTICS AND SUPPLY		DEPL	DEPLOYMENT VALIDATION		
1. Personal military clothing, basic issue, or like quanti	ties on hand.				
2. Organizational clothing and equipment issued for du	ity MOS.				
DD Form 2506, Vehicle Impoundment Report - Government provided storage of personal items.					
4. Weapon issued - if applicable, serial number:					
5. Theater specific clothing issued.					
6. Theater specific equipment issued.					
7. Protective mask inserts on hand, as required.					
8. Triple or quadruple flange ear plugs on hand.					
TRAINING		DEPLOYMENT VALIDATION		ATION	
1. Weapon qualification, if applicable.					
 OF 346, U.S. Government Motor Vehicle Operator's License, issued, if applicable. 	Identification Card - M	lilitary Drivers			
3. Force protection training administered.					
4. TARP briefing.					
5. Personnel recovery training.					
6. Warrior tasks completed, as required.					
7. Deployment briefing to Family members (only upon	alert).				
8. Local laws for deployment country briefing.					
9. Media awareness training.					
10. Theater specific training requirements completed.					
11. UCMJ briefing.					
12. Terrorist briefing.					
13. Geneva Convention briefing.					
14. Safety and Law of Land Warfare briefing.					
15. Service Members Civil Relief Act briefing.					
16. Reemployment Rights briefing.					
17. Employer Support of the Guard and Reserve briefi	ng (USAR/ARNG only)).			
 Army Financial Literacy Training. Training required years) and if any of the following occurred since las First Child, Divorce, Vesting in TSP, Continuation F Enrollment in EFMP. 	st SRP: PCS, Promotic	on, Marriage, Birth of			
LEGAL		DEPL	DEPLOYMENT VALIDATION		
1. Will (counseling or education).					
2. Power of Attorney (counseling or education).					
SECURITY	,		DEPLOYMENT VALIDATION		ATION
1. Security clearance meets requirement for duty posit	ion and deployment m	ission.			
CHAPLAIN	l		DEPLOYMENT VALIDATION		ATION

18. NAME (Last, First, Middle)	19. RANK/GRADE	20. UNIT NAME, PHO	NE NUMBER		21. UIC	
SECTION 2 (INSTALLATION)			STATUS	CERTIFIED BY (INITIALS)	DATE (YYYYMMDD)	
FINANCE						
1. Perform pay account verification with each Soldier.						
2. Eagle cash card issued.						
MEDICAL			DEPLO	YMENT VALIDA	TION	
 Soldier screened by credentialed provider for all psych health, medical, alcohol/substance abuse). 	o-social risk behavi	ors. (Behavioral,				
2. Immunizations current.						
3. Serum Collection.						
4. Human immunodeficiency virus (HIV) antibody test cur	rrent.					
5. DNA tissue sample on file AFIP - SF 600, Chronologic	al Record of Medica	al Care.				
6. Verify exceptional Family member status updated, as r	required.					
7. Medical record review.						
8. Hearing (HRC status: 1/2= Ready, 3/4=Not Ready).						
9. Temporary or permanent profile that restricts deployment	ent (Yes = Not Read	dy). Deployment only.				
 DD Form 2795, Pre-Deployment Health Assessment, Assessment (PDHA), and DD Form 2900, Post Deplo completed. Deployment only. 						
11. Theater specific immunizations required for deployment	ent area.					
12. Prescriptions, sufficient supply; minimum 180 days if	OCONUS.					
13. Periodic health assessment completed, as required.						
14. G-6 PD Test. Deployment only.						
15. Neurocognitive assessment (NCA) screening (ANAM	, ImPACT, or both).	Deployment only.				
16. Pregnancy test within 30 days of deployment. Deploy	ment only.					
DENTAL			DEPLO		TION	
1. Dental classification (1 or 2 = Ready; 3 or 4 = Not Rea	dy) and date.					
			DEPLO		TION	
1. Vision readiness classification (1 or 2 = Ready; 3 or 4 = Not Ready) and date.						
		DEPL O		TION		
1. Army Community Service: Family Readiness Group or		rovided	52.20			
	Form 1172-2, Application for Identification Card/DEER Enrollment - issued/DEERS updated.					
ACCURACY STATEMENT: I understand I am certified fo		•	dge all information	on contained in th	e document is	
22. SOLDIER'S NAME (Last, First, Middle)	23. RANK/GRADE 24. UNIT		JNIT			
25. PHONE	26. SIGNATURE		27. [27. DATE (YYYYMMDD)		
	UNIT COMMANDE 29. TITLE	RVALIDATION	30. UNIT NAME, PHONE NUMB		NE NUMBER	
31. EMAIL	32. SIGNATURE	NATURE 33. DATE (YYYYMM)		DD)		
INSTALL	ATION ADJUTANT	GENERAL VALIDATIO				
34. INSTALLATION/VALIDATION POC (Last, First, Middle)	35. TITLE			36. UNIT		
			ATURE 39. DATE (YYYYMM			