

# Relocation Request for CONUS TO OVERSEAS

OMB CONTROL NUMBER: 0702-0131  
OMB EXPIRATION DATE: XX/XX/XXXX

## AGENCY DISCLOSURE NOTICE

The public reporting burden for this collection of information, 0702-0131, is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at [whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil](mailto:whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

## PRIVACY ACT STATEMENT

**AUTHORITY:** Title 10 U.S.C. 7013, Secretary of the Army; Title 10 U.S.C. 9013, Secretary of the Air Force; Army Regulation 215-1, The Administration of Morale, Welfare, and Recreation Activities and Non-appropriated Fund Instrumentalities; Army Regulation 215-8/AFI 34-211(I), Army and Air Force Exchange Service Operations; and E.O. 9397 (SSN), as amended.

**PRINCIPAL PURPOSE(S):** To process official travel requests for civilian employees of the Army and Air Force Exchange Service; to determine eligibility of individual's dependents to travel; to obtain necessary clearance where foreign travel is involved, including assisting individual in applying for passports and visas and counseling where proposed travel involves visiting/transiting communist countries and danger zones.

**ROUTINE USE(S):** Your records may be disclosed outside of DoD pursuant to Title 5 U.S.C. §552a(b)(3) regarding DoD "Blanket Routine Uses" published at <http://dpcl.d.defense.gov/Privacy/SORNsIndex/BlanketRoutineUses.aspx>. This may include disclosures to the attaché or law enforcement authorities of foreign countries, the U.S. Department of Justice or Department of Defense legal/intelligence/investigative agencies for security, investigative, intelligence, and/or counterintelligence operations.

**DISCLOSURE:** Voluntary, however failure to provide all the information needed may result in denial of your PCS orders.

A copy of the Privacy Impact Assessment (PIA) for this collection may be located at <http://www.aafes.com/about-exchange/public-affairs/FOIA/assessments.htm>.

## INSTRUCTIONS

1. Please read the above Agency Disclosure Notice and Privacy Act Statement prior to responding below to review, complete, and answer the following questions.
2. **In order to provide you with appropriate orders, each question must be answered.**
3. When you have completed the request form, press the submit button and your information will be automatically forwarded to the Exchange authorized HR travel associates for completion of your PCS orders.
4. All approved signatures will be obtained by the HR representative.
5. You will be provided a copy of your final approved PCS orders.
6. If you have questions, concerns, or need more information, please see your HR manager.

 Respond

Survey Name:

Relocation Request for CONUS to OVERSEAS

Survey Description:

Time Created:

MM/DD/YYYY XX:XX XM



## Relocation Request for CONUS to OVERSEAS

\* indicates a required field

1. Last name, First name, Middle name (include Jr, Sr, II, III, etc.) \*

2. Last five (5) digits of Social Security Number \*

3. Current PB Grade \*

Y NUMBER \*

4. Current Duty Station \*

5. New Duty Station \*

6. Are you \*

7. Home Address (Street/State/Zip Code) \*

8. Home Phone Number (include area code) \*

9. Commerical Work Phone Number \*

10. Cell Phone Number \*

11. Email Address \*

FAMILY MEMBER INFORMATION - list dependents only. Full name as it appears on official government ID such as driver's license or passport. Children age 21 yrs and older are not entitled to travel benefits. If you have no family members (dependents) please skip to question #16.

12. Family Member #1 (full legal name),

Your relationship to Family Member #1

Family Member #1 Birth Date (DDMMYYYY)

Family Member #1 Birth Place

Will family member #1 accompany you to your new duty station at the same time?

13. Family Member #2 (full legal name)

Your relationship to Family Member #2

Family Member #2 Birth Date (DDMMYYYY)

Family Member #2 Birth Place

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Will family member #2 accompany you to your new duty station at the same time?

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14. Family Member #3 (full legal name)

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Your relationship to Family Member #3

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Family Member #3 Birth Date (DDMMYYYY)

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Family Member #3 Birth Place

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Will family member #3 accompany you to your new duty station at the same time?

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15. Family Member #4 (full legal name)

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Your relationship to Family Member #4

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Family Member #4 Birth Date (DDMMYYYY)

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Family Member #4 Birth Place

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Will family member #4 accompany you to your new duty station at the same time?

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If you have additional family members (dependents), please list them here. Use the same format as above.

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16. Will you drive or fly to your new duty station? \*

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17. You are authorized to ship one POV, unless you do not own a POV. POV's are not authorized to be

shipped to Japan. The Exchange will reimburse you 50% of the shipping cost. \*

NOTE: If this is a CONUS to CONUS move, you need only to type N/A for the remainder of this questionnaire. If this is an Overseas move, please answer the questions.

18. Has Family Member #1 ever been issued a passport? \*

If yes, what type of passport was it? \*

Expiration date of passport for family member #1 (DDMMYYYY) \*

Do you still have the passport for family member #1? \*

19. Has family member #2 ever been issued a passport? \*

-If yes, what type of passport was it? \*

Expiration date of passport for family member #2 (DDMMYYYY) \*

Do you still have the passport for family member #2? \*

20. Has family member #3 ever been issued a passport? \*

If yes, what type of passport was it for family member #3? \*

Expiration date of passport for family member #3 (DDMMYYYY) \*

Do you still have the passport for family member #3? \*

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21. Has family member #4 ever been issued a passport? \*

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If yes, what type of passport was it for family member #4? \*

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Expiration date of passport for family member #4 (DDMMYYYY) \*

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Do you still have the passport for family member #4? \*

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NOTE: If you have additional family members (dependents), please include their passport information in the text box. Use the same format as above. \*

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22. Employee's Birth Date (DDMMYYYY) \*

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23. Employee's Birth Place \*

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24. Have you ever been issued a passport? \*

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25. If yes, what type of passport was it? \*

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26. Expiration date for your passport (DDMMYYYY) \*

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27. Do you still have your passport? \*

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You and/or your family members will need 2 (two) 2X2 passport photos (must be taken within the past 6 months).

You will also need proof of citizenship, which can be: previously issued passport, OR a state certified birth certificate (hospital birth certificate is not acceptable).

If you owe more than \$5,000 in back child support, the State Department will not issue you a passport.

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28. Will you ship your POV? Note: only one POV is authorized at the Exchange/AAFES expense. \*

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NOTE: If you are transferring to Japan/Okinawa, you are not authorized to ship a POV unless it was manufactured before March 1976. The vehicle must be one you currently own. The Exchange/AAFES does not pay to store vehicles.

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29. If you answered yes (ship POV), please provide the following information: Make, Model, Year and VIN # \*

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30. Have you attended Anti-Terrorism Training within the last 12 months? \*

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31. Have you completed the SERE100 (Survival Evasion Resistance and Escape) Training within the past 2 years? \*

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32. Have you completed the ISOPREP (Isolated Personnel Report) Training within the past 6 months? \*

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33. Have you completed the DoD Information Assurance Awareness Training within the past 12 months? \*

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NOTE: You and your family members (dependents) are required to attend the Anti-Terrorism Training and an AOR Briefing on the country you are transferring to. The AOR Briefing must be within 90 days of your report date to the new duty station. It is your responsibility to see that you and your dependents receive this training. Questions? Please contact the military security office on the military base where you are stationed or if you are at HQ, contact Mr. Glenn Smith at X6700. Airline tickets will not be issued until proof of training has been provided to Relocation/Travel. Please scan and email or fax to 214-465-2001.

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34. Will you be shipping pets? \*

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Pets are strictly your responsibility. After your flights have been booked to your new duty station, you will need to contact the airline to book your pet(s). There have been numerous problems transporting pet(s) during the summer months and airlines may refuse to transport them. We will do our best to book you on an airline that ships pets, but it is ultimately your responsibility to get them to your new duty station.



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36. If yes, list your weapons that you want to ship so they may be listed on your PCS Orders. Use this format: Manufacturer, Model and Serial #. \*

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NOTE: Federal Law requires you to complete DD-2760 Form certifying you have not been convicted of a "misdemeanor crime of domestic violence". This form can be located on the Exchange/AAFES Intranet, Forms & Pubs link, under DoD Forms. You are not authorized to ship weapons to the following countries: Germany, Japan, Okinawa, Italy or Turkey. Weapons may be stored with non-temp storage items.

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You will need to make your airline reservations using the Travel Request form under Quick Links. Be sure to list any dependents and their birthdates in the "Remarks" section at the bottom of the form. We recommend you depart on the Wed. before your effective date. This is necessary in order for you to get your ration/ID cards and take care of any other business required before your report date. If you plan on departing from a location other than your home or making any stops enroute to your new duty station, it will be based on a cost-constructive basis. We will need to know this up front so we can work with the airlines to get your desired flight booked and you can get your vacation leave approved in advance.

Comments:

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37. The airlines now require we provide an emergency contact name and number for the traveler. This needs to be a family member. Please provide full name, home phone number and work phone number. \*

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38. We will also need a contact name, address and phone number after you move out of your residence in case we need to get in touch with you. \*

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39. Actual Place of Residence. Please list your home of record, city and state. If this is not your current home address, it needs to be a location where you own property or where your family resides. \*

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SUMMARY: You will receive your PCS Orders and Transfer/ Transportation Agreement via e-mail along with other pertinent information regarding your transfer. If you need passport applications and instructions, please let me know so they can be e-mailed to you. If you have any questions or concerns, please do not hesitate to contact the Relocation Team at 214-312-2502.

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This completes the Relocation Questionnaire. Please click on FINISH when you are through and don't forget to contact HR Relocation to schedule your PCS Out-Briefing. Thank you and have a safe trip.

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Comments or Questions

