

APPLICATIONS:

- Accreditation
- CTS
- SFAC
- VADATS
- SOS

PROGRAM PAGES:

Select a Program Page

REPORTS:

Select a Report

RESOURCES:

- Transitional Compensation
- Personnel Management



HQDA Survivor Outreach Services

Brandi Jacobs
Wednesday, December 16, 2020

Case Number [Case Locator](#)

- Dashboard
- Cases ▾
- Agency Contacts
- Reminders
- Activities
- Advanced Search ▾
- Staff ▾

Add Case: Create New Survivor * = Required

* Relation to Service Member Survivor is Primary Next of Kin

Prefix

Preferred Name

* First Name

Middle Name

* Last Name

Suffix

* DOB (mm/dd/yyyy)

Child/Minor

Note
0 of 2000 characters used

Vehicle Decal Number

Decal Issue Date

Gold Star Card Number

Gold Star Card Issue Date

Survivor Military Service Status

Deceased

- Aunt
- Battle Buddy
- Brother
- Brother in law
- Cousin
- Daughter
- Daughter in law
- Ex Spouse
- Father
- Father in law
- Fiance
- Friend
- Granddaughter
- Grandfather
- Grandmother
- Grandson
- Guardian of DSM Child
- Half Brother
- Half Sister
- Mother
- Mother in law
- Nephew
- Niece
- Sister
- Sister in law
- Son
- Son in law
- Spouse
- Stepbrother
- Stepdaughter
- Stepfather
- Stepmother
- Stepsister
- Stepson
- Uncle
- Other

- Not Applicable
- Active
- Veteran
- Retired

Contact Information

OK to Contact

Primary Phone Phone Type

Alternate Phone Phone Type

Email

Home Address

Address

Address continued

City

* State

ZIP Code

* Country

Counties for State

* County

Mail Address

Enter a mail address only if it is different from the home address.

Address

Address continued

City

State

ZIP Code

Country

[Spell Check](#)

[Next: Update Service Member](#)

[Cancel](#)



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Case Number Search [Case Locator](#)

Dashboard Cases Agency Contacts Reminders Activities Advanced Search Staff

Add Case: Create DSM for John Test

* = Required

DCIPS ID

* First Name

Middle Name

* Last Name

Suffix

DOB (mm/dd/yyyy)

* Branch

* Component

* Duty Status → Active Duty
Retired

Rank

Posthumous Rank

Date Of Incident

* Date Of Death

* Manner Of Death → Accidental
Auto Accident
Homicide
Illness
Killed in Action
Result of Injuries Sustained in Combat
Self-Inflicted
Training Accident
Other

* Non-Reportable Yes No

* Veteran Yes No

* High Profile Yes No

Combat Zone