

**UNIFORMED SERVICES UNIVERSITY IN/OUT-PROCESSING CHECKLIST STAFF PERSONNEL ONLY**

LAST NAME		FIRST NAME	MI	SSN	RANK
SERVICE	ARRIVAL DATE	DEPARTURE DATE		LAST EVAL/FITREP	
DEPT	POSITION	FOWARDING ADDRESS (DEPARTING ONLY)			

**THIS FORM IS SUBJECT TO THE PRIVACY ACT OF 1974**

Authority: 5 USC 301, 10 USC 8012 and 8034, and EO 9397.

Routine Use: To Process Arriving and Departing Military Members through various USUHS Departments

Disclsure is Voluntary: Failure to provide required information may result in individual processing delays.

DEPARTMENT	ROOM	INITIALS	DATE PROCESSED
BRIGADE COMMANDER	C1023		
DEAN SOM (STAFF & FACULTY)	A1010A		
DEAN GSN (STAFF & FACULTY)	A1024		
BRIGADE EXEC OFF/HQ CO CDR	C1012		
BDE SENIOR ENL ADVISOR/1SG (ENL ONLY)	C1022		
BDE SPECIFIC SEN OFF (OFF ONLY)			
SVC SPECIFIC SEN ENL ADF (ENL ONLY)			
PLT SGT/DIV CPO/FLT CHIEF (ENL ONLY)			
EVALUATION BRANCH/WRAMC BLDG 11/ARMY ONLY			
MILITARY PERSONNEL OFC (LAST ITEM)	C1016		
MIL PERS/AWARDS CLERK (DB & DATA SHEET)	C1016		
BRIGADE OPERATIONS (HT/WT, APFT CARD)	C1039		
IMMEDIATE SUPERVISOR			
CAREER COUNSELOR/REENLISTMENT NCO			
UNIVERSITY HEALTH CLINIC	A1034		
FINANCIAL MANAGEMENT	A1040		
MULTI DISCIPLINE LAB (MDL)	A2030		
UNIVERSITY INFORMATION SYSTEMS	G074		
LOGISTICS (OUT-PROCESSING ONLY)	G045		
SECURITY DIVISION	U001		
LEARNING RESOURCES CENTER	D1001		
TRICARE ENROLLMENT FACILITY			
MAIL ROOM	G059A		
ENVIRONMENTAL HEALTH & OCCUPATIONAL SAFETY (EHS)	A2020		
ARMY ONLY - FINANCE/PERSONNEL - WRAMC			
BRIGADE COMMAND CHAPLAIN	C1099		
CUFS (OUT PROCESSING ONLY)	G011		
OFFICE OF RESEARCH (REA) (Faculty Only)	A1032		

All USUHS personnel assigned space at AFRRI must turn in any keys, access cards, and exposure measuring devices before USUHS security office will sign off on their departure forms.

Additional AFFRI departure requirements

LOGISTICS/FACILITIES (KEYS)	C3148		
SECURITY OPERATIONS (BADGES)	C3433		
SAFETY OFFICE (SAFETY)	C1421		

All Evaluation Reports due must be completed and turned into the MPO prior to your final out-processing appointment.

MBR INTIALS \_\_\_\_\_ DATE: \_\_\_\_\_

Remarks: I fully understand my responsibility to remove all University parking decals and/or temporary permits from my vehicle(s), clear all hand receipts, and return all loaned or issued property to the issuing office.

Member Signs: \_\_\_\_\_ Director MPO Signs \_\_\_\_\_