

SPONSORSHIP PROGRAM COUNSELING AND INFORMATION SHEET – For use of this form, see AR 600-8-8; the proponent agency is OACSIM.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: PRINCIPAL PURPOSE: ROUTINE USES: DISCLOSURE: Title 5, USC Section 301. Personnel service support. To counsel Soldiers or Civilian employees on the benefits of the **Total Army Sponsorship Program** and provide information to gaining battalion or activity on arrival of new members.

1. ARRIVAL INFORMATION TO ASSIST GAINING UNIT OR ACTIVITY:

- a. I (Rank/Grade and Name) _____ Gaining Installation _____
 expect to arrive at your command (Month and Year) _____
- b. Soldier's/Civilian's contact information:
 Cell Phone number: _____ Email address: _____
- c. Status (check one):
 Married-accompanied Single-accompanied Married-unaccompanied Single-unaccompanied

d. Accompanied by Family members:

NAME	AGE	SEX	RELATIONSHIP	EFMP
				<input type="checkbox"/> yes <input type="checkbox"/> no
				<input type="checkbox"/> yes <input type="checkbox"/> no
				<input type="checkbox"/> yes <input type="checkbox"/> no
				<input type="checkbox"/> yes <input type="checkbox"/> no

2. FAMILY CONSIDERATIONS:

- a. Housing requirements (check one):
 On-post housing Off-post housing
- b. Pets: yes no
 if yes, list pet and type: _____
- c. Child care requirements: yes no
- d. Spousal Employment info: yes no
 if yes, list type of work: _____
- e. List of local schools: yes no
- f. Contact by unit FRG: yes no
- g. Additional comments: _____
- if yes, list Email address: _____

3. LOCATOR INFORMATION:

- a. Current Unit/Activity Address: _____ b. DSN Phone number: _____
- c. Leave Address and Phone number at this address until: _____

4. LOSING UNIT INFORMATION:

- a. Losing Unit: _____
- b. Unit Commander: _____
 Phone number: _____
 Email address: _____
- c. Unit First Sergeant: _____
 Phone number: _____
 Email address: _____

5. NOTE: Soldiers/Family members/Civilians may retrieve information regarding their new assignment at **Army Knowledge Online** – <https://www.us.army.mil>

- I have been counseled on the **Total Army Sponsorship Program**
- Typed or Printed Name: _____ Rank/Grade: _____
- Military Career Field/Civilian Occupational Series: _____ Signature: _____ Date: _____

6. GAINING UNIT INFORMATION:

- a. Gaining Unit: _____
- b. Unit Commander: _____
 Phone number: _____
 Email address: _____
- d. Unit First Sergeant _____
 Phone number: _____
 Email address: _____
- c. Unit sponsor: _____
 Phone number: _____
 Email address: _____