

US Army Sustainment Command Request for Deployment

SECTION A - EMPLOYEE	
1. NAME	2. TITLE/SERIES/GRADE
3. CURRENT ORGANIZATION	4. PASSPORT: <input type="checkbox"/> OFFICIAL (BROWN) <input type="checkbox"/> TOURIST (BLUE) <input type="checkbox"/> NO
5. DESIRED DEPLOYMENT DATES:	6. SECURITY CLEARANCE / TYPE AND DATES:
<p>I understand that work may entail extended work shift of 12 hours a day. Generally, indoor work location has power, water, heating and air conditioning, although outages should be expected. Lack of sleep may occur due to long work hours and uncomfortable living conditions. Employee will report symptoms of stress and fatigue to the on-site supervisor. Living conditions range from having all basic amenities (e.g., light, power, water, refrigeration) to not having one or more of these amenities. Employees who need to store refrigerated medication shall prior to departure from the primary duty station inform the local EOC so availability of refrigeration at the work site can be determined. Environmental conditions at work locations may range from excessive heat and humidity to extreme cold and rainy. Some locations require that the employee be able to maintain stable mobility in sandy and unstable terrain. Although some work is sedentary, there may be some lifting involved in the work.</p>	
SIGNATURE:	DATE:

SECTION B – SUPERVISOR		
1. The employee is successfully performing the duties of the permanent position of record OR I am able to verify the incumbent's past performance in the duties of the position he/she is applying for.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
2. The employee fully participates as a team member and appears to be willing and capable of performing the job duties in a diverse and possibly hostile environment at an acceptable level of competence.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
3. I support the employee's request for deployment.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Justification for denial of deployment request: (Attachment for additional justification)		
<p>I understand that the employee's application will be send to the ASC Deployment Coordinator for consideration for deployment in support of the Army Sustainment Command mission. If selected the employee will be TDY from his/her current position, and will receive the same level of local support he/she would receive for any long-term TDY assignment (travel orders, time and attendance, performance appraisals, etc.). The first-line supervisor will remain directly involved in administrative supervision for this employee throughout the entire deployment.</p>		
SIGNATURE:	DATE:	

SECTION C – BRIGADE COMMANDER / DIRECTOR (If applicable)		
I approve the employee's request for deployment.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Justification for denial of deployment request: (Attachment for additional justification)		
SIGNATURE:	DATE:	

SECTION D – HQ ASC COMMAND (If request is denied)		
I approve the employee's request for deployment.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Justification for denial of deployment request: (Attachment for additional justification)		
SIGNATURE:	DATE:	