

Kadena Air Force Base Military and Family Readiness Center (M&FRC)
Client Information and Service Delivery Statement of Understanding (SOU)
(Good for 1 year)

MILITARY MEMBER INFORMATION					DoD ID:	
NAME (First, Middle, Last)			GRADE	LAST 4 SSN		STATUS
						BRANCH OF SVC
SEX	MARITAL STATUS	DATE OF BIRTH		UNIT		BASE
HOME ADDRESS (Include Zip Code)		PERSONAL PHONE		WORK PHONE	EMAIL ADDRESS	
Purpose of Visit (Circle One): Personal Financial Management - Employment Assistance - Transition - Emergency Financial Aid Family Life - Relocation - Family Readiness - Volunteer Program - EFMP - Cultural Awareness – Deployment - Other						
SPOUSE/NOK INFORMATION						
NAME (First, Middle, Last)			LAST 4 SSN	E-MAIL ADDRESS		
ADDRESS (if different than military member)				PERSONAL PHONE		
MINOR CHILDREN						
Name(s)		Date of Birth		Name(s)		Date of Birth
PRIVACY ACT STATEMENT						
AUTHORITY: 10 U.S.C. 8013 and Executive Order 9397 PRINCIPAL PURPOSE: Client demographics are required for accurate service delivery, analysis, and future program planning. ROUTINE USES; This information may be disclosed to federal, state, local or foreign law enforcement authorities for investigating or prosecuting a violation or potential violation of law; to federal, state, or local agencies to obtain information concerning hiring or retention of an employee, issuance of other benefit; to congressional office in response to their inquiry made at the request of the individual; to the Office of Management and Budget in connection with review of private relief legislation as set forth in OMB Circular A-19; to NARA for records management inspections; and to the Department of Justice for pending or potential litigation. DISCLOSURE IS VOLUNTARY: Failure to provide the necessary data will not result in the individual being denied services.						

Demographics and Services: You are being asked to provide information for secure storage in our Air Force Family Integrated Results and Statistical Tracking (FIRST) system. Your record contains demographic information, a brief description of your visit(s), and information regarding your service plan. Records are maintained for the sole purpose of continued service to you.

Privacy and Disclosure: The A&FRC respects your right to privacy, however, the staff members **DO NOT** have privileged communication. If your supervisor, Commander, or First Sergeant made your appointment for you, we may provide them general feedback about the consultation, but normally will not go in to specific details. Air Force policy requires any A&FRC staff to contact proper authorities regarding any statement made or information disclosed if it pertains to possible violations to AFI 40-301 (Family Advocacy Program) or admission of a crime in violation of the Uniformed Code of Military Justice, federal, or state law(s).

Minor Children Clause: By signing this form, you grant permission for your minor child to participate in our services and/or activities. You agree to and shall indemnify and hold harmless the A&FRC, its offices, agents, and employees, from and against any and all claims, losses, damages, causes of action, suits, and liability of every kind; including all expenses of litigation, court costs, and attorney's fees, for any injury or damages which you, your child, or any other person or entity might sustain as a result of your child participating in a service/activity.

Photographs: Please be aware that photographs may be taken for use in promoting our programs and events. The photographs may be used in various media outlets, including (but not limited to) internet, publications, and social media. **If you do not want your picture taken or shared, PLEASE INFORM A STAFF MEMBER DURING THE EVENT IN WHICH PHOTOGRAPHS ARE BEING TAKEN.**

By signing below, you are acknowledging you have read and understand the above information.

Date

Personal Readiness Inventory

Name: _____

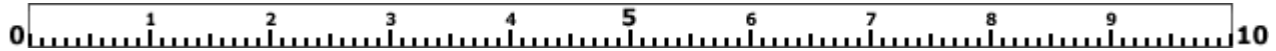
Sponsors Last 4: _____

Date: _____

Please answer this brief inventory, it helps us understand your overall personal readiness and adjustment to military life. Instructions: Based on the past week please rate how well things are going by placing a hash mark on the 0-10 scales below, with 10 as the best possible rating. Your consultant will use your answers to clarify your goals for coming to the Airman and Family Readiness Center.

OVERALL ADJUSTMENT TO MILITARY LIFE

(Understand & support the military lifestyle & mission requirements, etc...)



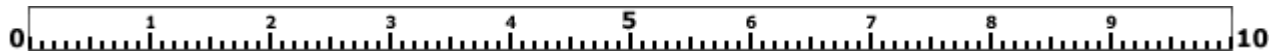
RELOCATION/MOVING

(Ability to move when required)



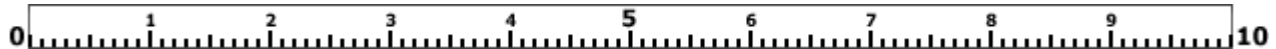
ADJUSTMENT TO COMMUNITY

(Ability to find on/off-base information, services, events & activities, etc...)



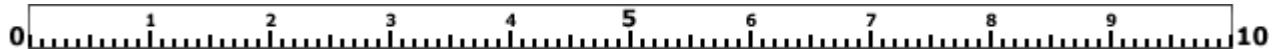
DEPLOYMENT READINESS

(Ability to support short-notice deployments, awareness of available support for loved ones, etc...)



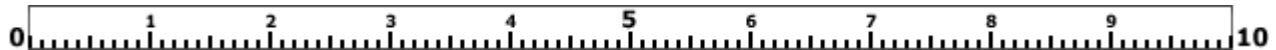
EMPLOYMENT

(Job search techniques & skills, ability to secure suitable employment, etc...)



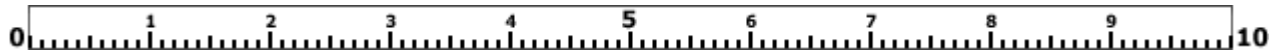
FINANCIAL READINESS

(Basic needs & financial obligations met, savings, investments & retirement, etc...)



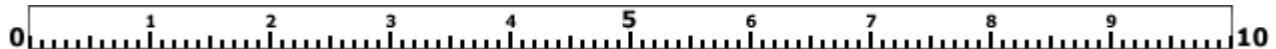
MILITARY/WORK ENVIRONMENT

(Work environment/relationships OPSTEMPO/pace of work)



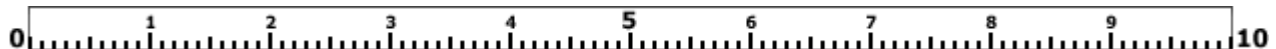
PERSONAL RELATIONSHIPS

(Family, Friends, & loved ones etc...)



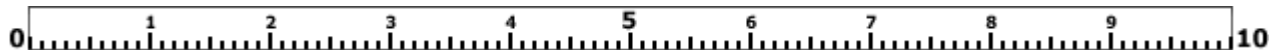
RETENTION

(Intention to continue military career past current commitment)



TRANSITION TO CIVILIAN LIFE

(Prepared for separation/retirement, aware of benefits & entitlements, etc.)



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