## AIR FORCE APPLICATION FOR COMMAND SPONSORSHIP FOR INCIRLIK AB

1. PERSONAL INFORMATION					
RANK/NAME	DOD ID				
AFSC	CURREN	T UNIT			
1a. ASSIGNMENT INFORMATION					
PROJ UNIT	PROJ PAS	SCODE			
RNLTD	PROJ AR	RIVAL DATE			
2. DEPENDENT INFORMATION					
	Name		Sex	Age	Intent to Bring
				(Must be 18+)	Y/N
DEPENDENT:					
DEPENDENT:		··			
For more than 2 dependents, include an additional sheet with required information.  ADDITIONAL INFORMATION					
Are you military married to military?      Are you coming from a consecutive overseas tour where you were unaccompanied?					
3. Will your family require housing with special needs capability?					
<ul> <li>4. If divorced with children, has child custody been identified/stated in the divorce decree?</li> <li>5. Quality Force Indicator (QFI) Review (please document any administrative actions (LOC, LOA, LOR), disciplinary actions</li> </ul>					
(Article 15), UIF/Control Roster, fitness assessment failures in past 24 months, etc.):					
Losing First Sergeant's Signature / Date					
6. Additional justification (will be considered by the CSP approval authority) – please do <b>not</b> leave blank:					
4 MEMBER CONTACT INFORMATION					
Member Work & Personal E-mail:					
Duty Phone:  ACKNOWLEDGEMENT STATEMENT					
I certify the information provided in this application is true and correct to the best of my knowledge. I also certify I am submitting a DD Form 1172 and AF Form 965 with this CSPApplication.					
Applicant's Signature / Date					
6. CURRENT ASSIGNMENT COUNSELOR INFORMATION (Inbound Members Only)					
MPF Counselor Rank/Name:					
MPF Counselor					
Organizational I	E-Mail Address:				
Incirlik AB CSP Organizational Inbox: 39fss.fspd.csp@us.af.mil					