

COMMAND SPONSORSHIP

Purpose: Soldiers requesting Command Sponsorship.

References:

AR 614-30
USAREUR Supplement 1 to AR 55-46
DoDI 1315.18 Procedures for Military Personnel Assignments

General:

1. Requests for command sponsorship will be forwarded to USAG MPD. When an exception to policy is required or when there are Exceptional Family Members cases will be forwarded by the MPD to IMCOM-E Family Travel Branch.
2. Family members who travel to overseas command under Government orders will be automatically command sponsored effective on their date of arrival into the command. All others must request command sponsorship.
3. The following requirements are necessary for a family member to become command sponsored:
 - a. Sponsor must be serving a 36-month tour. (cannot be waived).
 - b. Sponsor must have 12 months remaining on tour (can be waived by IMCOM-E).
 - c. Family member must meet criteria to qualify as a dependent as indicated in Appendix A, Volume 1, Joint Federal Travel Regulation.
 - d. Family member must be screened through the Exceptional Family Member Program and cleared to reside in the Soldier's community of assignment.
4. Requests for command sponsorship that must be sent to IMCOM-E will include the following documentation.
 - a. DA Form 4187 requesting command sponsorship or conditional command sponsorship and must include following information:
 1. Reason for request and date of circumstance which caused action to be initiated (marriage, adoption, etc.).
 2. Date Soldier arrived overseas.
 3. DEROS.
 4. ETS.
 5. Whether or not Soldier is on assignment instructions.
 6. Name of family member(s) for whom command sponsorship is requested.
 7. Date family member(s) arrived in command.
 8. Current location of family members.
 9. Whether or not family members are enrolled in the Exceptional Family Member Program.

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- b. Enclosures to DA Form 4187 will include the following:
 1. Marriage license, court documents, or other such documentation relating to family members.
 2. Current ERB/ORB.
 3. PCS orders and all amendments.
 4. DA Form 5888-R (Family Member Deployment Screening) and DD 2792 and or DD 2792-1 with Individual Education Plan if medical condition exists.
5. The latest of the following dates will be the effective date of command sponsorship:
 - a. Date of request.
 - b. Date family member(s) arrived in command.
 - c. Date tour status is changed.
6. Service Requirements:
 - a. In USAREUR, Soldiers who are ineligible to extend a service or overseas tour to meet the 12-month time-in-station requirement must request an exception to policy.
 - b. Requests for exception to policy will be forwarded to IMCOM-E for consideration.
 - c. If the Soldier has a family member enrolled in the EFMP, the Garrison MPD will forward the request to IMCOM-E for EFMP clearance.
 - d. Family members who have been placed in the primary physical custody, as defined by the Joint Federal Travel Regulations (JFTR), appendix A, of the Soldier because of a court order may be command-sponsored if they meet the definition of "dependent" in the JFTR, appendix A. The court order must have been issued by a court of competent jurisdiction in the United States, Puerto Rico, or a possession of the United States. The Family member must have been placed in the Soldier's custody for at least 12 months. Custody granted for less than 12 months or seasonal custody (summer-school breaks, joint-custody visitation) will not qualify the Family member for command sponsorship. Soldiers should be encouraged to pursue custody that will be effective throughout their tour outside the continental United States (OCONUS).

NOTE: An affidavit, power of attorney, or other document prepared by a military legal office or notary public is not acceptable for determining eligibility for command sponsorship or travel entitlements.

Questions concerning Command Sponsorship may be addressed to the Family Travel Branch, IMCOM-E at DSN 379-6343/7631/7614/7577 or email family-travel@eur.army.mil.

NOTE:

Children born to command-sponsored dependent spouses are command-sponsored at birth.

SAMPLE OF DA FORM 4187 AND COMMAND SPONSORSHIP CHECKLIST

BELOW:

COMMAND SPONSORSHIP

Copy 1

Circle the appropriate copy designator

Copy 2

Copy 3

Copy 4

PERSONNEL ACTION		
For use of this form, see AR 600-8-6 and DA PAM 600-8-21; the proponent agency is ODCSPER		
DATA REQUIRED BY THE PRIVACY ACT OF 1974		
AUTHORITY:	Title 5, Section 3012; Title 10, USC, E.O. 9397.	
PRINCIPAL PURPOSE:	Used by soldier in accordance with DA PAM 600-8-21 when requesting a personnel action on his/her own behalf (Section III).	
ROUTINE USES:	To initiate the processing of a personnel action being requested by the soldier.	
DISCLOSURE:	Voluntary. Failure to provide social security number may result in a delay or error in processing of the request for personnel action.	
1. THRU (Include ZIP Code)	2. TO (Include ZIP Code) S-1	3. FROM (Include ZIP Code) SOLDIERS UNIT ADDRESS
SECTION I - PERSONAL IDENTIFICATION		
4. NAME (Last, First, MI) DOE, JAYLEN M.	5. GRADE OR RANK/PMOS/AOC SGT/E-5/25F20	6. SOCIAL SECURITY NUMBER 000-00-0000
SECTION II - DUTY STATUS CHANGE (AR 600-8-6)		
7. The above soldier's duty status is changed from _____ to _____ effective _____ hours, _____		
SECTION III - REQUEST FOR PERSONNEL ACTION		
8. I request the following action: (Check as appropriate)		
<input type="checkbox"/> Service School (Enl only)	<input type="checkbox"/> Special Forces Training/Assignment	<input type="checkbox"/> Identification Card
<input type="checkbox"/> ROTC or Reserve Component Duty	<input type="checkbox"/> On-the-Job Training (Enl only)	<input type="checkbox"/> Identification Tags
<input type="checkbox"/> Volunteering For Oversea Service	<input type="checkbox"/> Releiving in Army Personnel Tests	<input type="checkbox"/> Separate Rations
<input type="checkbox"/> Ranger Training	<input type="checkbox"/> Reassignment Married Army Couples	<input type="checkbox"/> Leave - Excess/Advance/Outside CONUS
<input type="checkbox"/> Reassignment Extreme Family Problems	<input type="checkbox"/> Reclassification	<input type="checkbox"/> Change of Name/SSN/DOB
<input type="checkbox"/> Exchange Reassignment (Enl only)	<input type="checkbox"/> Officer Candidate School	<input checked="" type="checkbox"/> Other (Specify) COMMAND SPONSORSHIP
<input type="checkbox"/> Airborne Training	<input type="checkbox"/> Asgmt of Pers with Exceptional Family Members	
9. SIGNATURE OF SOLDIER (When required)		10. DATE (YYYYMMDD)
SECTION IV - REMARKS (Applies to Sections II, III, and V) (Continue on separate sheet)		
1. Soldier requests Command Sponsorship of the following family members IAW PARA 1-14(2)(3) of AR 55-46 and Para 4-3b(1) of AR 614-30 dated 1 May 1987		
NAME	RELATIONSHIP	DOB
Bobbie Doe	Spouse	NA
Susie Doe	Daughter	3 Oct 97
2. In support of this request, the following information is provided:		
a. Present address in Germany where family currently resides (NOT CMR ADDRESS):		
b. Is the SM on orders? Yes _____ No _____		
c. Date SM arrived at PDS: _____ DEROS _____ ETS _____		
THE FOLLOWING SUPPORTING DOCUMENTS SHOULD BE ATTACHED:		
a. Signed DA FORM 4187, b. Marriage Certificate, c. Birth Certificate (children), d. DA FORM 5888 (When EFMP warranted 5862 is needed as well), e. Copy of orders bringing soldier to Germany, f. ERB, g. When children custody involved: Affidavit stating that the child is entitled to transportation until the soldier PCS. Any other travel will be at soldier's expense.		
SECTION V - CERTIFICATION/APPROVAL/DISAPPROVAL		
11. I certify that the duty status change (Section II) or that the request for personnel action (Section III) contained herein -		
<input type="checkbox"/> HAS BEEN VERIFIED <input type="checkbox"/> RECOMMEND APPROVAL <input type="checkbox"/> RECOMMEND DISAPPROVAL <input type="checkbox"/> IS APPROVED <input type="checkbox"/> IS DISAPPROVED		
12. COMMANDER/AUTHORIZED REPRESENTATIVE	13. SIGNATURE	14. DATE (YYYYMMDD)