



Standard Statement of Understanding (SOU) for Wing SM

PRIVACY ACT STATEMENT AUTHORITY:

10 U.S.C. 8013

Executive Order 9397 Privacy Act of 1974

DoDIs 5400.11-R, CH 4 and 6025.18

DoDM 6025.18, part 2 of Title 42, Code of Federal Regulations, as applicable.

Controlled by: 139th AW M&FRP

CUI Categories: PRVCY

Distribution/Dissemination Control: FEDCON

POC: M&FRPM Amy Mathias

INFORMATION PROVIDED TO MILITARY & FAMILY READINESS PROGRAMS IS IAW:

DODI 1342.22 Military Family Readiness: 4.3.A.

DAFI 36-3009 Military & Family Readiness Centers: 3.4

AFI 10-403 Deployment Planning & Execution: 1.18.9 & 3.8.9.7 & 5.7.5

CNGBM 1800.02A National Guard Bureau Manual Enclosure D.5.B

PRINCIPAL PURPOSE: Client demographics required for accurate service delivery, and future program planning.

ROUTINE USES: Track family information to provide family support during member's TDY/deployment.

TODAY'S DATE:

PRINT as neatly as possible, to reduce the risk of errors.

SERVICE MEMBER INFORMATION

NAME (LAST, FIRST, MIDDLE INITIAL) To include Maiden/Surname if changed since initial SOU		GRADE / RANK	UNIT
SERVICE MEMBERS DOD ID NUMBER	FULL - SSN #	BRANCH OF MILITARY SERVICE	CURRENT MILITARY STATUS
HOME ADDRESS (Street, City, State, Zip Code)		HOME /CELL PHONE	WORK PHONE
		H <input style="width: 50px;" type="text"/>	
		C <input style="width: 50px;" type="text"/>	
SM - EMAIL (MILITARY)		MARITAL STATUS	DATE OF BIRTH (MM/DD/YYYY)
			M <input type="checkbox"/> F <input type="checkbox"/>
SM - EMAIL (PERSONAL)			

FAMILY MEMBER / DESIGNEE / EMERGENCY CONTACT INFORMATION (Please do not put the SM information below)

FAMILY MEMBER / DESIGNEE / EMERGENCY NAME (LAST, FIRST MIDDLE INITIAL)		MARITAL STATUS	LAST 4 SSN (IF KNOWN)	DOB (MM/DD/YYYY)
HOME / CELL PHONE	RELATIONSHIP TO MILITARY MEMBER	HOME / MAILING ADDRESS (If same as Military Member note "SAME")		
H <input style="width: 50px;" type="text"/>				
C <input style="width: 50px;" type="text"/>				
FAMILY MEMBER / DESIGNEE / EMERGENCY PERSONAL EMAIL ONLY		INTEREST IN VOLUNTEERING FOR THE WING	SEX	CURRENT MILITARY SERVICE OR VETERAN
		Y <input type="checkbox"/> N <input type="checkbox"/>	M <input type="checkbox"/> F <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>

SERVICE MEMBER DEPENDENTS	SEX	ADDRESS	AGE	DOB (MM/DD/YYYY)	EFMP SPECIAL NEEDS CHILD BENEFITS MAY BE AVAILABLE	
	M <input type="checkbox"/> F <input type="checkbox"/>	HOR <input type="checkbox"/> OTHER <input type="checkbox"/>			Y <input type="checkbox"/>	N <input type="checkbox"/>
	M <input type="checkbox"/> F <input type="checkbox"/>	HOR <input type="checkbox"/> OTHER <input type="checkbox"/>			Y <input type="checkbox"/>	N <input type="checkbox"/>
	M <input type="checkbox"/> F <input type="checkbox"/>	HOR <input type="checkbox"/> OTHER <input type="checkbox"/>			Y <input type="checkbox"/>	N <input type="checkbox"/>
	M <input type="checkbox"/> F <input type="checkbox"/>	HOR <input type="checkbox"/> OTHER <input type="checkbox"/>			Y <input type="checkbox"/>	N <input type="checkbox"/>
	M <input type="checkbox"/> F <input type="checkbox"/>	HOR <input type="checkbox"/> OTHER <input type="checkbox"/>			Y <input type="checkbox"/>	N <input type="checkbox"/>


ADDITIONAL INFORMATION

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SERVICE MEMBER'S PERSONAL READINESS INVENTORY (PRI)

Please answer this brief inventory, it helps us understand your overall personal readiness and adjustment to military life.

Based on the past week please rate how well things are going by choosing a **number 1-10 below, with 10** as the **best** possible rating. Please no N/A's.

OVERALL ADJUSTMENT TO MILITARY LIFE		RELOCATION/MOVING		ADJUSTMENT TO COMMUNITY		DEPLOYMENT READINESS
Understand & Support the Military Lifestyle & Mission requirements, etc ...		Ability to Move when Required		Ability to find On/Off-Base Information, Services, Events, & Activities, etc...		Ability to Support Short-Notice Deployments, Awareness of Availability Support for Loved Ones, etc...
EMPLOYMENT		FINANCIAL READINESS		MILITARY/WORK ENVIRONMENT		
Job Search Techniques & Skills, Ability to Secure Suitable Employment, etc...		Basic Needs & Financial Obligations, Savings, Investments & Retirement, etc...		Work Environment Relationships OPSTEMPO/pace of work...		
PERSONAL RELATIONSHIPS		RETENTION		TRANSITION TO CIVILIAN LIFE		
Family, Friends & Loved Ones, etc...		Intention to Continue Military Career Past Current Commitment		Prepared for Separation/Retirement, Aware of Benefits & Entitlements, etc...		

SERVICE MEMBERS REASON FOR IN / OUT - PROCESSING

(check only those that apply) Transfer Out(Relocation)- <input type="checkbox"/> 30 Day+ TDY- <input type="checkbox"/> MO/State Mission- <input type="checkbox"/> BMT or TRAININGS- <input type="checkbox"/> ADOS/STAT/MPA- <input type="checkbox"/> Solo Deployment- <input type="checkbox"/> AEF/RCP Deployment- <input type="checkbox"/> Veterans- <input type="checkbox"/> Army/Navy/Marines/Space/CC- <input type="checkbox"/> Other Not listed- <input type="checkbox"/>				Estimated Departure Date:	
				Estimated Return Date:	
ORDERS STATUS DEPARTING/RETURNING IN: (REQUIRED)		Title 32 <input type="checkbox"/>	Title 10-Active/STAT/MPA/Contingency/BMT/Training - <input type="checkbox"/>	Other Not listed - <input type="checkbox"/>	
TRANSFER TO Location or Country:					
WILL FAMILY RELOCATE WITH SERVICE MEMBER:	Yes- <input type="checkbox"/> NO- <input type="checkbox"/> N/A- <input type="checkbox"/>	Before/ During or After transfer:		Before <input type="checkbox"/> After <input type="checkbox"/> During <input type="checkbox"/> N/A <input type="checkbox"/>	
MEMBER REFERRED BY:				TAP REQUIRED:	Yes- <input type="checkbox"/> NO- <input type="checkbox"/> N/A- <input type="checkbox"/> Check Status- <input type="checkbox"/>

MILITARY & FAMILY READINESS PROGRAM ONLY SECTION

Services Provided/Required:					
SM information updated in AFFIRST:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Updates completed by:		Date:	
SM information updated in MS TEAMS:	Transfers Relocation Notify their M&FR <input type="checkbox"/> Deployments/TDY/Training <input type="checkbox"/> Yellow Ribbon <input type="checkbox"/> TAP <input type="checkbox"/> NO MS Teams <input type="checkbox"/>				

MISSOURI AIR NATIONAL GUARD 139th AIRLIFT WING
MILITARY & FAMILY READINESS PROGRAM STATEMENT OF UNDERSTANDING (SOU)

If you've never been to the Military & Family Readiness Center (M&FRC) before, you may be unsure of what to expect. The following information is offered for you to consider and, if you wish, to discuss with a staff member.

Services: The M&FRC is here to assist you in a variety of ways. We can help customers prioritize their concerns, needs, and assist them in understanding what resources may enable them to cope with personal, family and work related situations. Many people have learned that talking with a qualified, objective, third party is very helpful when confronting a new or stressful situation. The M&FRC offers resources, programs, classes and workshops. Military family Readiness service providers and official volunteers may contact military family members with or without the Service member or sponsor's consent when relaying information in support of readiness. Information which may be relayed without consent may include, but is not limited to, information to support deployment readiness, relocation, and personal financial readiness; and MFR pamphlets, fliers, and other information on resources to connect military families to services that build resilience, readiness and enhance quality of life.

Privacy & Disclosure: You can expect the M&FRP staff to respect your right to privacy. Personal information will be appropriately safeguarded and not released without written consent. **Limits of Confidentiality Statement:** M&FR staff members and Volunteers **Do NOT** have complete privileged communication. Information you provide to me, or other State Family Program Staff will be kept confidential, except to meet legal obligations or to prevent harm to self or others. Legal obligations include requirements of law or DoD or military regulations. harm to self or others includes suicidal thought or intent, a desire to harm oneself, domestic violence, child abuse or neglect, violence against any person, and any present or future illegal activities. The Squadron commander will be notified of situations, which may directly impact on personal health, safety or mission accomplishment. If your supervisor/commander/first sergeant made the appointment for you to come to the M&FRC, we will provide general feedback to that person, but will not ordinarily go into specific detail.

Demographics & Services: You will be asked to provide demographic information, which is electronically stored (and secured) in the Air Force Family Integrated Results and Statistical Tracking (AFFIRST) system. The record contains demographic information, a brief description of your visit(s), and your service plan. Records are maintained for the sole purpose of assisting you the customer.

Compliant Procedure: Any concerns of services provided in the M&FRP Office should be taken up with the M&FRP Manager, if still not resolved you have additional 139th ALW contacts. Additional contact information for the Wing M&FRP Office complaint procedure information will be provided if requested and is displayed in the M&FRP Office. **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 M&FRP, its offices, agents and employees from and against all claims, losses, damages, causes of action, suites and liability of every kind. This includes 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 an M&FRP staff member during the event in when photographs are being taken.

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