



DEPARTMENT OF THE NAVY  
OFFICE OF THE CHIEF OF NAVAL OPERATIONS  
2000 NAVY PENTAGON  
WASHINGTON, D.C. 20350-2000

1754  
Ser N135/024  
4 Apr 11

From: Director, Personal Readiness and Community Support Branch  
(OPNAV N135)  
To: Director, Manpower and Personnel, Office of the Chairman  
of the Joint Chiefs of Staff (J1)  
Subj: Command Communications to Families  
Ref: (a) 23 March 2011 Chairman Joint Chiefs of Staff Family  
Support Meeting After Action Report  
Encl: (1) Applicable Service Forms and Guidance for Command  
Communications to Families

1. As requested in reference (a), enclosure (1) forwards the  
Service forms and/or guidance for command communications to  
families.

A handwritten signature in black ink, appearing to read "M. J. Browne", is positioned above the typed name.

M. J. BROWNE  
Rear Admiral, U.S. Navy

# ARMY

Enclosure (1)



**DEPARTMENT OF THE ARMY**  
**ASSISTANT CHIEF OF STAFF FOR INSTALLATION MANAGEMENT**  
**600 ARMY PENTAGON**  
**WASHINGTON, DC 20310-0600**

DAIM-ZA

MEMORANDUM FOR SEE DISTRIBUTION

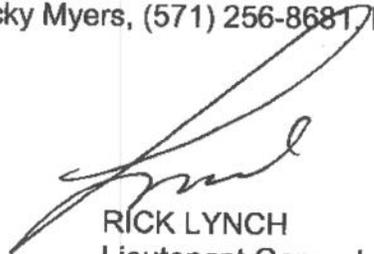
SUBJECT: Official Communications in Support of Family Readiness

1. Reference Army Regulation 608-1, Army Community Service, 21 Dec 2010; The Army Family Readiness Handbook: Operation Ready, 2006.
2. Army Community Service (ACS) and Command authorities may contact Family members, with or without the sponsor's consent, when relaying official information directly related to Family readiness. The "yes/no" contact option on all Family Assistance Information Sheets located in Operation Ready materials has been removed. Army One Source has uploaded the new forms and organizations should use the updated forms. Army Regulation 608-1 will be modified to reflect this change.
3. Family Readiness is the cornerstone of war fighting readiness. Effective Family support and quality of life programs enhance our Soldier's ability to support our nation's military commitments. Our Soldiers and Families must be kept informed of available services and programs and how to access and use them. Accordingly, we must have a communication strategy that delivers accurate, timely, and responsive information to Soldiers and their Families.
4. Family readiness is a commander's responsibility. Official Family readiness information includes information related to support services and social, informational, caretaking, and morale-building activities aimed at enhancing preparedness for the total Army Family. For example, commanders can disseminate unclassified information regarding schedules, command points of contact, location, and availability of Family program resources, and mustering and accounting procedures for exercises and real-world emergencies. Commanders can also disseminate information designed to educate Soldiers and Families concerning the local and military community, military pay and allowances, financial planning, emergency preparedness, and volunteer opportunities with Army-affiliated support organizations, e.g., Army Emergency Relief.
5. Commanders and other designated command members can personally communicate with Families. Commanders can also leverage the resources of existing readiness-affiliated programs such as Family Readiness Group (FRG) Leaders, Family Readiness Support Assistants (FRSAs), and Army Community Service (ACS). The FRG Leader, formally appointed by the commander, serves as the commander's primary advisor to ensure Families have the information necessary to meet the challenges of military life. The FRSA's may also disseminate official Family readiness information.

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SUBJECT: Official Communications in Support of Family Readiness

6. Commanders are permitted to collect and maintain personally identifiable information (PII) (home address, mailing address, private phone numbers, personal email addresses, and names of Family members) to properly account for Soldiers and Family members during routine or emergency situations and for purposes of disseminating official Family readiness information.
7. Commanders must protect PII at all times. Personal information obtained or maintained through official sources may not be used for unofficial purposes. Unofficial information such as commercial ventures, advertisements, and private solicitations may not be disseminated through official communication networks. Without prior consent, commanders may not release personal contact information to individuals or entities outside the command. Commanders and Family support organizations must communicate in a manner that respects the privacy of Families, avoiding group emails that reveal private information. For example, commanders cannot release data of Families who received financial counseling through ACS.
8. Commanders should consult with assigned Staff Judge Advocates or General Counsel Attorneys if questions arise regarding this policy.
9. The OACSIM POC is Ms. Becky Myers, (571) 256-8681, DSN 260-8681, or email: [becky.myers@us.army.mil](mailto:becky.myers@us.army.mil).



RICK LYNCH  
Lieutenant General, GS  
Assistant Chief of Staff  
for Installation Management

DISTRIBUTION:

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SUBJECT: Official Communications in Support of Family Readiness

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Director, Army National Guard

# FAMILY ASSISTANCE INFORMATION SHEET

## PRIVACY ACT STATEMENT

AUTHORITY: Title 10, USC, Section 3012. PRINCIPLE PURPOSE(S): To assist Army Agencies and Commands in their mission of providing care and assistance to families of Service members who are required to be away from their home station. ROUTINE USES: (1) To identify specific problems and service needs of soldiers and their families. (2) To gather data that will assist in the development of appropriate programs and services. (3) To serve as a record of services provided. MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION: Voluntary information is required to assist the individual and his/her family members. Failure to provide the required information could result in a delay in providing assistance to the individual and/or family members.

### 1. SPONSOR INFORMATION:

NAME: \_\_\_\_\_ RANK/GRADE: \_\_\_\_\_ SSN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street City State Country Zip

HOME PHONE NUMBER W/ AREA CODE: \_\_\_\_\_

2. MILITARY STATUS: ACTIVE \_\_\_\_\_ NATIONAL GUARD \_\_\_\_\_ USAR (TPU) \_\_\_\_\_ USAR(IMA) \_\_\_\_\_ USAR (IRR) \_\_\_\_\_ CIV \_\_\_\_\_

UNIT: \_\_\_\_\_ UNIT ADDRESS: \_\_\_\_\_

3. MARITAL STATUS: SINGLE \_\_\_\_\_ MARRIED \_\_\_\_\_ DIVORCED \_\_\_\_\_ (Name of Ex-Spouse) \_\_\_\_\_

4. SPOUSE'S NAME: \_\_\_\_\_

5. CHILDREN: YES \_\_\_\_\_ NO \_\_\_\_\_

NAME(S)	AGE	ADDRESS
_____	_____	_____
_____	_____	_____
_____	_____	_____

### 6. PRIMARY NEXT OF KIN (PNOK)

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street City State Country Zip

HOME PHONE NUMBER W/ AREA CODE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

NATIVE LANGUAGE SPOKEN BY SPOUSE/PNOK: \_\_\_\_\_

NEAREST MILITARY INSTALLATION TO YOUR SPOUSE/PNOK: \_\_\_\_\_

### 7. SECONDARY NEXT OF KIN (SNOK)

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street City State Country Zip

HOME PHONE NUMBER W/ AREA CODE: \_\_\_\_\_

### 8. EVALUATE POTENTIAL FAMILY PROBLEMS/CONCERNS DURING YOUR ABSENCE:

A. SPECIAL NEEDS. ARE THERE SPECIAL NEEDS IN YOUR FAMILY? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, STATE PROBLEM AND ASSISTANCE NEEDED \_\_\_\_\_

B. FINANCIAL. WHAT ARRANGEMENTS HAVE BEEN MAKE TO PROVIDE FINANCIAL SUPPORT TO SPOUSE/CHILDREN? \_\_\_\_\_

CHECK TO BANK (SURE PAY)\_\_\_ ALLOTMENT\_\_\_ OTHER, SPECIFY \_\_\_\_\_

C. HOUSING. WILL YOUR FAMILY (SPOUSE/CHILDREN) RELOCATE AS A RESULT OF THIS DEPLOYMENT? YES\_\_\_  
NO\_\_\_

IF YES, RELOCATION ADDRESS: \_\_\_\_\_  
STREET CITY STATE COUNTRY ZIP

PHONE NUMBER W/ AREA CODE: \_\_\_\_\_

IF NO, ARE THERE ANY CONCERNS ABOUT CURRENT HOUSING SITUATIONS?  
SPECIFY \_\_\_\_\_

D. TRANSPORTATION. DOES YOUR SPOUSE/PNOK DRIVE? YES\_\_\_ NO\_\_\_

WILL TRANSPORTATION BE A PROBLEM DURING YOUR ABSENCE? NO\_\_\_ YES,

EXPLAIN \_\_\_\_\_

E. LIST ANY OTHER PERTINENT ISSUES WHICH WILL HAVE AN ADVERSE AFFECT ON YOUR DEPLOYMENT: \_\_\_\_\_

9. FAMILY DOCUMENTS CHECKLIST: DO YOU OR YOUR FAMILY MEMBERS HAVE THE FOLLOWING DOCUMENTS?

ID CARDS YES/NO

POWER OF ATTORNEY YES/NO

FAMILY CARE PLAN YES/NO (SINGLE PARENT, DUAL- MILITARY COUPLES OR PREGNANT SOLDIERS) IF YES,  
DOES THE FAMILY CARE PROVIDER HAVE INSTALLATION ACCESS LETTER? YES\_\_\_ NO\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_



E-Mail Address \_\_\_\_\_

Native Language Spoken by Spouse/PNOK: \_\_\_\_\_

Nearest Military Installation to Your Spouse/PNOK: \_\_\_\_\_

**7. Secondary Next Of Kin (SNOK)**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Country Zip

Home Phone Number w/ Area Code: \_\_\_\_\_

**8. Evaluate potential family problems/concerns during your absence:**

A. Special needs. Are there special needs in your family? Yes \_\_\_ No \_\_\_

If yes, state problem and assistance needed. \_\_\_\_\_

B. Financial. What arrangements have been made to provide financial support to spouse/children? Check to Bank (Sure Pay) \_\_\_ Allotment \_\_\_ Other \_\_\_\_\_

C. Housing. Will your family (spouse/children) relocate as a result of this deployment? Yes \_\_\_ No \_\_\_

If yes, relocation address: \_\_\_\_\_  
Street City State Country Zip

Phone Number w/ Area Code: \_\_\_\_\_

If no, are there any concerns about current housing situations? Specify:  
\_\_\_\_\_

D. Transportation. Does your spouse/PNOK drive? Yes \_\_\_ No \_\_\_

E. Will reliable transportation be a problem during your absence? No \_\_\_ Yes \_\_\_

Explain \_\_\_\_\_

F. List any other pertinent issues that will have an adverse affect on your deployment:

\_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**AIR FORCE**



**AIRMAN & FAMILY READINESS CENTER (A&FRC)  
DEPLOYMENT/REMOTE FAMILY SUPPORT INFORMATION SHEET**

*Personal Data, Privacy Act of 1974 as amended applies. This may contain information which may be protected IAW DoD 5400.11R and is For Official Use Only (FOUO).*

**All information in this box must be completed  
(Please Print)**

**Military Member's Information**

Last four of SSN: \_\_\_\_\_ Rank: \_\_\_\_\_ Marital Status \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Local Address: \_\_\_\_\_

AF / ARMY / USN / USMC \_\_\_\_\_ Squadron: \_\_\_\_\_  
(Circle one)

Deployment / TDY/ Remote \_\_\_\_\_ Deployed Country: \_\_\_\_\_  
(Circle one)

Estimated Departure Date: \_\_\_\_\_ Estimated Return Date: \_\_\_\_\_

**Family Remaining in Area: Yes No NA**  
(Circle One)

If you circled NO, please provide:

Temp Address \_\_\_\_\_ Temp City \_\_\_\_\_

Temp State, Zip \_\_\_\_\_ Temp Contact Phone \_\_\_\_\_

Fam Mbr Departure Date \_\_\_\_\_ Fam Mbr Return Date \_\_\_\_\_

**The person you list below will be authorized to make morale calls to you.**

Relationship to You: (circle one)

Spouse Fiancée Mother Father Brother Sister Friend Other: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_



**AIRMAN & FAMILY READINESS CENTER (A&FRC)  
DEPLOYMENT/REMOTE FAMILY SUPPORT INFORMATION SHEET**

Special Occasion Contact Information for birthdays, anniversaries, holidays, graduations and any other event.

1. Name \_\_\_\_\_ Date \_\_\_\_\_

Occasion \_\_\_\_\_

Contact Information \_\_\_\_\_

2. Name \_\_\_\_\_ Date \_\_\_\_\_

Occasion \_\_\_\_\_

Contact Information \_\_\_\_\_

3. Name \_\_\_\_\_ Date \_\_\_\_\_

Occasion \_\_\_\_\_

Contact Information \_\_\_\_\_

4. Name \_\_\_\_\_ Date \_\_\_\_\_

Occasion \_\_\_\_\_

Contact Information \_\_\_\_\_

5. Name \_\_\_\_\_ Date \_\_\_\_\_

Occasion \_\_\_\_\_

Contact Information \_\_\_\_\_

**For A&FRC Staff Only:** (Please check all services that were provided)

Initial: \_\_\_\_\_ Date \_\_\_\_\_

- Car Care (voucher #: \_\_\_\_\_ )
- Give Parents A-Break
- Morale Call
- All Services were declined

# MARINE CORPS

APPENDIX A

NAVMC 11654 (5-09) (EF)

FOUO - Privacy Sensitive when filled in.

Print Form

Unit, Personal and Family Readiness Program Authorization

This Authorization is solely for use by the Unit, Personal and Family Readiness Program (UPFRP) and is not to be confused with the Record of Emergency Data (RED). While information provided may be the same for both the UPFRP Authorization and the RED, the RED is the official record and will be referred to for all official communication outside the parameters of the UPFRP, e.g. casualty notification.

PRIVACY ACT STATEMENT

AUTHORITY: 10 USC 5013; EO 9397; 10 USC 5041 PRINCIPAL PURPOSE(S): To obtain required information for sponsors, spouses and designated contacts for the identified Unit, Personal and Family Readiness Program to enable the unit Commander and designated staff members and authorized volunteers to communicate in an accurate, rapid, and efficient manner with sponsor, spouse and Designated Contacts on matters relating to their Unit, Personal and Family Readiness Program. Access to personally identifiable information contained on data sheets will be on an official "need to know" basis and granted only to authorized persons with current certificates showing completion of requisite Personally Identifiable Information Training.

ROUTINE USES(S): None.

DISCLOSURE: Participation is mandatory for sponsors. Sponsors must provide a primary and secondary contact path. It is also mandatory for married sponsors to provide a primary contact path for spouse or a signed Opt-out Form should the spouse choose not to participate. For military personnel, generally MCO 1754.9, chapter 2, paragraph 3.m and specifically chapter 4, paragraph 2.a(2)(3) are lawful orders and are punitive in nature. Violations may result in disciplinary action under Article 92 of Uniform Code of Military Justice, and/or other adverse administrative action. It is not mandatory for single sponsors to provide required information for anyone other than themselves. All designated contacts must be over the age of 18 with the exception of a spouse. The current Unique ID, "Last Name, Last Four" is required as it is essential to identify the sponsor and his/her designated contacts.

Sponsor Name : \_\_\_\_\_

Unit : \_\_\_\_\_

Family Readiness Officer : \_\_\_\_\_

Instructions :

I hereby authorize the unit commander and designated members of the unit's Family Readiness Command Team, to include but not limited to, the unit Family Readiness Officer (FRO) and designated UPFRP Volunteers to communicate with my spouse\*, and individuals I have listed below, hereinafter referred to as "Designated Contacts" on matters pertaining to the UPFRP. Designated Contacts must be 18 years of age or older, with the exception of a spouse.

\*Designated Contact #1 : \_\_\_\_\_

\*It is mandatory for spouses to be listed as Designated Contact #1 for married sponsors or submit a signed Opt-Out Form.

Designated Contact #2: \_\_\_\_\_

Designated Contact #3: \_\_\_\_\_

Designated Contact #4: \_\_\_\_\_

Communication will be in compliance with Marine Corps Order 1754.9, Unit, Personal and Family Readiness Program, and deemed by the unit commander to be relevant, appropriate and in accordance with his vision and intent for his UPFRP.

The UPFRP may use the Mass Communication Tool as one method of effecting clear and direct communication on matters pertaining to personal and family readiness (readiness and deployment support, information and referral and official command communications) between the sponsor, spouse\* and Designated Contacts. (DoN Systems of Record Notice M01754-5)

The UPFRP will use the Volunteer Tracking Tool as one method of effecting clear and direct communication on matters pertaining to volunteer opportunities. (DoN Systems of Record Notice NM01754-2)

Sponsor Signature : \_\_\_\_\_

Sponsor Name : \_\_\_\_\_

Rank : \_\_\_\_\_

Reset Form

**Unit, Personal and Family Readiness Program Authorization**

Sponsor Name : \_\_\_\_\_

Unit : \_\_\_\_\_

Family Readiness Officer : \_\_\_\_\_

**Instructions :**

**All Sponsors:** All Sponsors are required to provide LAST NAME, FIRST NAME, LAST 4 OF SSN, BIRTHDATE, ONE PRIMARY CONTACT PATH AND ONE SECONDARY CONTACT PATH to enable reliable and timely delivery of communication from the command. The Sponsor may choose from any of the available delivery paths listed below. Standard text messaging charges will apply. Designated Contacts must be 18 years of age or older, unless a spouse. Ensure information is complete.

**Single Sponsors:** Designated Contacts are optional.

**Married Sponsors:** Spouse\* shall be entered as Designated Contact #1. One primary contact path and one secondary contact path to enable reliable and timely delivery of communication from the command to the spouse is required unless/until a signed Opt-Out Form is on file with the unit.

(\*Spouse has the right to Opt-Out; however, information for the spouse is required until an Opt-Out Form with signatures is submitted to the unit at which time the information for the spouse will be deleted. Opting out is not a recommended course of action due to the benefits of receiving official communication, information and referral services from the UPFRP. Should the Spouse Opt-Out, all family readiness communication from the command including deployment-related communications, will be the responsibility of the sponsor.)

**Language Codes :** A Code other than E (English) will alert the FRO that the Designated Contact is not fluent or may have difficulty understanding communications in English. There is no guarantee that translation will be available should another language code be provided.

E=English S=Spanish (Europe or Latin America) J=Japanese F=French I=Italian P=Portuguese

**Contact Codes:** For all Designated Contacts, enter the appropriate contact code. \* Designated Contacts must be 18 years of age or older with the exception of a spouse

S=Spouse \*C=Child P=Parent \*F=Family member or other contact

**Sponsor Information (Mandatory)** For military personnel, generally chapter 2, paragraph 3.m and specifically chapter 4, paragraph 2.a(2) of MCO 1754.9 are lawful orders and punitive in nature. Violations may result in disciplinary action under Article 92 of the Uniform Code of Military Justice and/or other adverse administrative action. **REQUIRED: LAST NAME, FIRST NAME, SSN (LAST 4), DATE OF BIRTH, PRIMARY/SECONDARY PATHS OF CONTACT**

UIC	Last Name	First Name	MI	SSN (last 4)	Contact Code
M					
Address			Apt No.	Date of Birth (MM/DD/YYYY)	
City			State	Zip	Country
Work E-Mail Address		Home E-Mail Address		Alternate E-Mail Address	
Work Cell Phone	Personal Cell Phone		Work Phone	Ext.	Home Phone
SMTP Text Device (email address-standard texting charges will apply)			SMS SMPP Text Device (telephone #-standard texting charges will apply)		
Language					

FOR OFFICIAL USE ONLY.

**Unit, Personal and Family Readiness Program Authorization**

Sponsor Name : \_\_\_\_\_

Unit : \_\_\_\_\_

Family Readiness Officer : \_\_\_\_\_

**Designated Contact #1**

*It is mandatory for married sponsors to provide required information for their spouse as Designated Contact #1 unless/until an Opt-Out Form with signatures is submitted to the unit at which time the information for the spouse will be deleted. REQUIRED: LAST NAME, FIRST NAME, PRIMARY/SECONDARY PATH OF CONTACT*

Last Name	First Name	MI	Contact Code
Address			Apt No.
City	State	Zip	Country
Work E-Mail Address	Home E-Mail Address	Alternate E-Mail Address	
Work Cell Phone	Personal Cell Phone	Work Phone	Ext. Home Phone
SMTP Text Device (email address-standard texting charges will apply)		SMS SMPP Text Device	
Language			

**Designated Contact #2 - OPTIONAL FOR ALL SPONSORS/ PERSON LISTED MUST BE 18 YEARS OF AGE OR OLDER**

Last Name	First Name	MI	Contact Code
Address			Apt No.
City	State	Zip	Country
Work E-Mail Address	Home E-Mail Address	Alternate E-Mail Address	
Work Cell Phone	Personal Cell Phone	Work Phone	Ext. Home Phone
SMTP Text Device (email address-standard texting charges will apply)		SMS SMPP Text Device	
Language			

Sponsor Initial \_\_\_\_\_

3 of 4  
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**Unit, Personal and Family Readiness Program Authorization**

Sponsor Name : \_\_\_\_\_

Unit : \_\_\_\_\_

Family Readiness Officer : \_\_\_\_\_

**Designated Contact #3 - OPTIONAL FOR ALL SPONSORS/ PERSON LISTED MUST BE 18 YEARS OF AGE OR OLDER**

Last Name		First Name		MI	Contact Code
Address					
					Apt No
City	State	Zip	Country		
Work E-Mail Address	Home E-Mail Address		Alternate E-Mail Address		
Work Cell Phone	Personal Cell Phone	Work Phone	Ext.	Home Phone	
SMTP Text Device (email address-standard texting charges will apply)		SMS SMPP Text Device			
Language					

**Designated Contact #4 - OPTIONAL FOR ALL SPONSORS/ PERSON LISTED MUST BE 18 YEARS OF AGE OR OLDER**

Last Name		First Name		MI	Contact Code
Address					
					Apt No
City	State	Zip	Country		
Work E-Mail Address	Home E-Mail Address		Alternate E-Mail Address		
Work Cell Phone	Personal Cell Phone	Work Phone	Ext.	Home Phone	
SMTP Text Device (email address-		SMS SMPP Text Device (telephone #-standard texting charges will apply)			
Language					

Sponsor Initial \_\_\_\_\_

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**NAVY**

UNCLASSIFIED

30 March 11  
N135F, (901) 874-4299  
Ms. Betty Talley

**Subject: NAVY FAMILY READINESS COMMUNICATIONS POLICY**

1. **Executive Issues:**

- CJCS, in an ongoing effort keep our military families informed and achieve the highest possible level of family readiness, has requested information on current policies and procedures regarding communications with our families.

2. **Background:**

- In the past commands have hesitated to directly communicate with families while the member was on deployment due to the member directing that the family not be contacted.
- Families stated they thought the commands were not provided information they needed.
- CJCS directed that the Services develop policies and procedures that allowed them to directly contact families providing official family readiness information even if the Service member does not desire family contact.

3. **Discussion:**

- Family readiness is a cornerstone of war fighting readiness.
- Official command communication with the family is key to their readiness.
- Navy issued NAVADMIN 295/10, Family Readiness Communications Policy (TAB A):
  - Family Readiness is a CO's responsibility, independent of the Sailor.
  - Command authorities may contact family members, with or without the sponsor's consent when relaying official information directly related to family readiness.
  - This official information includes information related to support services and social, informational, care-taking, and morale building activities aimed at enhancing preparedness for the total Navy family community.
  - COs and other designated command members (e.g., command ombudsmen) can communicate with families.
  - Command ombudsmen, formally appointed in accordance with OPNAVINST1750.1F, Navy Family Ombudsman Program, holds official command status and serves as the CO's primary advisor and assistant in ensuring families have information.
  - Commands are directed to use the "most effective and efficient means at our disposal." Electronic communication systems, including social media, e-mail and websites are encouraged.
  - Information regarding the collection, use and protection of personally identifiable information (PII).
- US Fleet Forces Command (USFF) in their role as Individual Augmentee (IA) executive agent has updated their deployment forms to reflect guidance on communications with families. The "Do not contact" option was replaced with "Contact for emergencies only." (TAB B)
- OPNAVINST 1750.1F, Navy Family Ombudsman Program, addresses release of official command rosters.
  - Commanding officers and commanders shall ensure that the Command Ombudsman receives a regularly updated Command roster to include inbound personnel and families.
  - Release of roster information to the Ombudsman without the consent of the Sailor is permitted when the Ombudsman is acting in an official capacity.
- OPNAVINST 1740.3C, Command Sponsor and Indoctrination Programs, addresses communication with spouses. The instruction enclosures (TAB C) include:
  - Prospective Gain Questionnaire which is completed by the incoming member does not include a yes/no option for family contact.
  - Sample Welcome Aboard Letter for member's spouse.

- Sample Welcome Aboard Letter from the command ombudsman which is sent to the family providing ombudsman contact information.

4. **Recommendations:**

- None, information only

UNCLASSIFIED//

ROUTINE

R 312222Z AUG 10

BT

UNCLAS

PASS TO ALL OFFICE CODES:

FM CNO WASHINGTON DC//N1//

TO NAVADMIN

INFO CNO WASHINGTON DC//N1//

UNCLAS

NAVADMIN 295/10//

MSGID/GENADMIN/CNO WASHINGTON DC/N1/AUG//

SUBJ/FAMILY READINESS COMMUNICATIONS POLICY//

REF/A/DOC/USG/03JAN07//

REF/B/DOC/SECNAV/28DEC05//

REF/C/DOC/OPNAV/23MAR05//

REF/D/DOC/OPNAV/09JUN10//

REF/E/DOC/DOD/14MAY07//

NARR/REF A IS TITLE 5, U.S. CODE 552A - REFERENCE TO THE PRIVACY ACT. REF B IS SECNAVINST 5211.5E - THE DON PRIVACY PROGRAM. REF C IS OPNAVINST 1750.1F - THE NAVY FAMILY OMBUDSMAN PROGRAM. REF D IS OPNAVINST 1754.5A - THE FAMILY READINESS GROUPS (FRG). REF E IS DODINST 5400.11-R - THE DEPARTMENT OF DEFENSE PRIVACY PROGRAM. RMKS/1. THIS NAVADMIN PROVIDES GUIDANCE TO COMMANDERS AND COMMANDING OFFICERS (CO'S) ON OFFICIAL COMMUNICATIONS IN SUPPORT OF FAMILY READINESS.

2. FAMILY READINESS IS A CORNERSTONE OF WARFIGHTING READINESS. EFFECTIVE FAMILY SUPPORT AND QUALITY OF LIFE PROGRAMS ENHANCE OUR SAILORS' ABILITY TO SUPPORT OUR NATION'S MILITARY COMMITMENTS. OUR SAILORS AND FAMILIES MUST BE KEPT INFORMED OF AVAILABLE SERVICES AND PROGRAMS SYSTEMS AND HOW TO ACCESS AND USE THEM. ACCORDINGLY, WE MUST HAVE A COMMUNICATION STRATEGY THAT DELIVERS ACCURATE, TIMELY AND RESPONSIVE INFORMATION TO SAILORS AND THEIR FAMILIES.

3. FAMILY READINESS IS A CO'S RESPONSIBILITY, INDEPENDENT OF THE SAILOR. COMMAND AUTHORITIES MAY CONTACT FAMILY MEMBERS, WITH OR WITHOUT THE SPONSOR'S CONSENT, WHEN RELAYING OFFICIAL INFORMATION DIRECTLY RELATED TO FAMILY READINESS.

4. OFFICIAL FAMILY READINESS INFORMATION INCLUDES INFORMATION RELATED TO SUPPORT SERVICES AND SOCIAL, INFORMATIONAL, CARE-TAKING, AND MORALE-BUILDING ACTIVITIES AIMED AT ENHANCING PREPAREDNESS FOR THE TOTAL NAVY FAMILY COMMUNITY.

FOR EXAMPLE, CO'S CAN DISSEMINATE UNCLASSIFIED INFORMATION REGARDING SCHEDULES, COMMAND POINTS OF CONTACT, LOCATION AND AVAILABILITY OF FAMILY SERVICE RESOURCES, AND MUSTERING AND ACCOUNTING PROCEDURES FOR EXERCISES AND REAL-WORLD EMERGENCIES.

CO'S CAN ALSO DISSEMINATE INFORMATION DESIGNED TO EDUCATE SAILORS AND FAMILIES CONCERNING THE LOCAL AND MILITARY COMMUNITY, MILITARY PAY AND ALLOWANCES, FINANCIAL PLANNING, EMERGENCYPREPAREDNESS, AND VOLUNTEER OPPORTUNITIES WITH NAVY-AFFILIATED SUPPORT ORGANIZATIONS (E.G., NAVY-MARINE CORPS RELIEF SOCIETY).

5. CO'S, AND OTHER DESIGNATED COMMAND MEMBERS, CAN PERSONALLY

TABA

COMMUNICATE WITH FAMILIES. CO'S CAN ALSO LEVERAGE THE RESOURCES OF EXISTING READINESS AFFILIATED PROGRAMS SUCH AS OMBUDSMEN AND FLEET AND FAMILY SUPPORT CENTERS. THE COMMAND OMBUDSMAN, FORMALLY APPOINTED IN ACCORDANCE WITH REF C, NAVY FAMILY OMBUDSMAN PROGRAM, HOLDS OFFICIAL COMMAND STATUS AND SERVES AS THE CO'S PRIMARY ADVISOR AND ASSISTANT IN ENSURING FAMILIES HAVE THE INFORMATION NECESSARY TO MEET THE CHALLENGES OF A MILITARY LIFE. THE COMMAND OMBUDSMAN CAN USE COMMAND RECALL ROSTERS IN THE PERFORMANCE OF DUTIES TO DISSEMINATE OFFICIAL FAMILY READINESS INFORMATION.

6. TO ENSURE SAILORS AND THEIR FAMILIES ARE AWARE OF FAMILY SUPPORT PROGRAMS, WE MUST USE THE MOST EFFICIENT AND EFFECTIVE MEANS AT OUR DISPOSAL. ELECTRONIC COMMUNICATION SYSTEMS, INCLUDING SOCIAL MEDIA, E-MAIL AND WEBSITES, OFFER A STRATEGIC AND TACTICAL ADVANTAGE BY ENABLING THE INSTANTANEOUS POSTING OF INFORMATION TO A LARGE AUDIENCE CONCERNING AVAILABLE RESOURCES AND PROGRAMS FOCUSED ON LIFE, HEALTH, WORK, CAREER, FINANCES AND COMMUNITY.

7. CO'S ARE PERMITTED TO COLLECT AND MAINTAIN PERSONALLY IDENTIFIABLE INFORMATION (PII) (HOME ADDRESS, MAILING ADDRESS, PRIVATE PHONE NUMBERS, PERSONAL E-MAIL ADDRESS, AND NAMES OF FAMILY MEMBERS) TO PROPERLY ACCOUNT FOR SAILORS AND FAMILY MEMBERS DURING ROUTINE OR EMERGENCY SITUATIONS AND FOR PURPOSES OF DISSEMINATING OFFICIAL FAMILY READINESS INFORMATION.

8. CO'S MUST PROTECT PII AT ALL TIMES. PERSONAL INFORMATION OBTAINED OR MAINTAINED THROUGH OFFICIAL SOURCES MAY NOT BE USED FOR UNOFFICIAL PURPOSES. UNOFFICIAL INFORMATION SUCH AS COMMERCIAL VENTURES, ADVERTISEMENTS, PRIVATE SOLICITATIONS, FUNDRAISING ACTIVITIES, AND BIRTHDAY WISHES, MAY NOT BE DISSEMINATED THROUGH OFFICIAL COMMUNICATION NETWORKS. WITHOUT PRIOR CONSENT, CO'S MAY NOT RELEASE PERSONAL CONTACT INFORMATION TO INDIVIDUALS OR ENTITIES OUTSIDE THE COMMAND, INCLUDING SPOUSE CLUBS OR FAMILY READINESS GROUPS. A PERMISSIBLE MANAGEMENT PRACTICE IS FOR THE MEMBER TO INDICATE AS PART OF THE CHECK-IN PROCESS WHETHER THEY, OR THEIR FAMILY MEMBER/SPOUSE, CONSENTS TO RELEASING FAMILY CONTACT INFORMATION TO EXTERNAL ORGANIZATIONS FOR PURPOSES OF RECEIVING INFORMATION REGARDING EVENTS AND FAMILY SUPPORT PROGRAMS. TO ENSURE FAMILY MEMBERS ARE PERSONALLY AWARE OF THE BENEFITS OF QUICK, DIRECT COMMUNICATION, THE CHECK-IN MAY REQUIRE EVIDENCE OF FAMILY MEMBER NOTIFICATION CONSENT AND DECISION.

9. OFFICIAL DATABASES CONTAINING PII MAY NOT BE USED TO IDENTIFY SAILORS OR FAMILY MEMBERS BASED ON CIRCUMSTANCE OR STATUS (E.G., MEDICAL, RELIGIOUS, FINANCIAL OR FAMILY SITUATION) FOR TARGETED CONTACT THAT WOULD CONSTITUTE AN INVASION OF PRIVACY. CO'S AND FAMILY SUPPORT ORGANIZATIONS MUST COMMUNICATE IN A MANNER THAT RESPECTS THE PRIVACY OF FAMILIES, AVOIDING GROUP EMAILS THAT REVEAL PRIVATE INFORMATION. FOR EXAMPLE, CO'S CAN NOT RELEASE DATA OF ALL FAMILIES WHO RECEIVED FINANCIAL COUNSELING THROUGH THE FLEET AND FAMILY SERVICE CENTER.

10. GUIDANCE ON THE PRIVACY ACT, OMBUDSMAN PROGRAM, AND FRGS IS OUTLINED IN REFS A THROUGH E. CO'S SHOULD CONSULT WITH ASSIGNED STAFF JUDGE ADVOCATES OR GENERAL COUNSEL ATTORNEYS IF QUESTIONS ARISE REGARDING TO THIS POLICY.

11. RELEASED BY VADM MARK FERGUSON, N1.//



- 1. Summary
- 2. Contact Information
- 3. Family Member Info
- 4. Event Information
- 5. Individual Augmentation
- 6. Reset Password

Click the Save button to make changes

**IA Information** [Help](#)

Departure Date : 11-19-2010      Planned Return Date: 12-02-2011  
 IA File No : 81362      Save      Cancel

Noble Eagle No.: NE-4433-0159      IA Destination: Iraq  
 Individual Deployment Support Specialist (IDSS ): WILLIAMS, KELLI M  
 IDSS Phone: 301-295-2709  
 IDSS Email: kelli.williams@med.navy.mil

IDSS Contact Interval: **Emergencies**

Number of Children  
 (Age 0-4):

(Age 5-17):

Daily  
 Every Week  
 Every 2 Weeks  
 Every Month  
 Every 2 Months  
 Every 3 Months  
**Emergencies**

Installation Specific Info Requested  
 Attending Family Readiness/Support Group  
 Parent Cmd Ombudsman Made Contact  
 Parent Cmd Ombudsman Following Up

CIAC Contact Interval: **Emergencies**

In-Theater Email: (no-email provided)  
 Command IA Coordinator (CIAC):  
 CIAC Phone:  
 CIAC Email:



- 1. Summary
- 2. Contact Information
- 3. Family Member Info
- 4. Event Information
- 5. Individual Augmentation
- 6. Reset Password

Click the Save button to make changes

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TAB B

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**PROSPECTIVE GAIN QUESTIONNAIRE  
COMMAND SPONSOR PROGRAM**

Please answer the following questions and return this form in the envelope provided. Your prompt response will allow us to better meet your needs during your upcoming transfer.

Date Completed: \_\_\_\_\_

1. My name and rate is: \_\_\_\_\_
2. I am:  married  single; Spouse's first name: \_\_\_\_\_
3. I have \_\_\_\_\_ children. Name(s): \_\_\_\_\_
  - a. My children are enrolled in the EFM Program:  Yes  No
  - b. My children are in \_\_\_\_\_ grade(s) in school.
4. My family will be traveling with me.  Yes  No
5. I have received/not received a no-fee passport(s) and visa(s) for my family members (if required).
6. I have \_\_\_\_\_ pets. (Cat \_\_\_\_\_ Dog \_\_\_\_\_ Other \_\_\_\_\_)
7. I am shipping a POV:  Yes  No
8. Upon arrival, I intend to live in:  on base housing  
 local economy.
9. I am shipping \_\_\_\_\_ lbs of household goods (HHG) and my express shipment was sent on: \_\_\_\_\_
10. My current contact phone number is:  
\_\_\_\_\_
11. My transfer date from my current command is: \_\_\_\_\_
12. A good phone number or e-mail address to contact me during leave/transit is: Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

TABC

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13. I expect to arrive at \_\_\_\_\_ on or about \_\_\_\_\_  
via  government air  commercial air  POV.

14. I have the following specific concerns/information about my  
upcoming transfer:

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1

**SAMPLE WELCOME ABOARD LETTER FROM OMBUDSMAN**

Date \_\_\_\_\_

Dear \_\_\_\_\_ Family,

Welcome to \_\_\_\_\_. I am one of the ombudsmen that will assist your family.

Ombudsmen are designated by the command to serve as communication links between the commanding officer and command family members, as well as trained information and referral specialists. We are your advocates ready to support, direct, and empower you with all of the resources available. Please be assured that ombudsmen follow the guidelines of confidentiality as required by the Navy Family Ombudsman Program.

We have many years of military spouse experience and have experienced the ups and downs that come with being part of a Navy family. As a team, we look forward to providing assistance that you might need during your time at the new duty station.

You may contact me through phone or e-mail. I am available 24 hours a day for emergencies. Contact information is included below.

Once again, I look forward to meeting you at the command orientation and/or command functions.

Sincerely,

Jane Doe  
(Command Name) OMBUDSMAN  
Insert e-mail address  
Insert phone number  
Phone hours for non-emergencies  
9am - 5pm

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**SAMPLE WELCOME ABOARD LETTER TO MEMBER'S SPOUSE**

Date \_\_\_\_\_

Dear Mr./Mrs. \_\_\_\_\_,

I would like you to know that we on the \_\_\_\_\_ are most pleased to have your spouse as a member of our crew.

\_\_\_\_\_ is joining an exceptional team that operates and maintains \_\_\_\_\_ with skill and great pride in their accomplishments. I look forward to working with your spouse and have every confidence that \_\_\_\_\_ will become a valuable member of our outstanding \_\_\_\_\_ team.

USS \_\_\_\_\_ is one of our Navy's finest ships. It has been built and overhauled to the most exacting engineering and safety standards which modern technology can develop. The task of operating and maintaining her is a demanding one, and one in which the talents and efforts of your spouse are truly needed. All personnel onboard are important to this effort and are provided the instruction and training needed to learn their jobs and shoulder their particular responsibilities. In turn, I expect each crewmember to work, learn their job, develop their talents, and conduct themselves in a responsible manner both on and off the ship. Additional information about our command is available on our Web site at \_\_\_\_\_.

Having served in our Navy for \_\_\_\_ years, I think I realize how much you (and your children) mean to your spouse and what it means to you when \_\_\_\_\_ is at sea. I would like you to know that I appreciate the support you give your spouse and fully recognize that \_\_\_\_\_ cannot give the best performance to the job without that support. The job your spouse is doing is clearly recognized as important by every responsible authority in our nation's government and it is a job of service which you can look upon with great pride. I look with equal pride on the wonderful service given by the Navy spouse.

I encourage you to join in the many Navy activities available to you and hope you will become a member of our Family Readiness Group. I am sure you will make new friends among the staff and their friendship will enrich the lives of you and your spouse. If they should need my help or advice, my door is always open.

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Additionally, if you should have the need to communicate with me concerning your spouse, please feel free to write at the above address or to call me, my executive officer or my Command Master Chief \_\_\_\_\_ at ( ) \_\_\_\_\_. Should the ship be at sea and an emergency arises which requires you to communicate with your spouse or me, you can contact \_\_\_\_\_, and they will arrange for communication between you and the appropriate party. Our command ombudsman is \_\_\_\_\_, and can be reached at \_\_\_\_\_. To ensure a smooth and seamless transition for your family's health care, please remind your spouse to contact \_\_\_\_\_, Health Benefits Advisor, at COMM/DSN \_\_\_\_\_ for uninterrupted TRICARE enrollment.

I will keep your spouse advised of the unit's operating schedule so \_\_\_\_\_ can pass the information on to you. The ship's schedule should not be discussed outside the family. I appreciate the necessity of your knowing when your spouse will be away and when \_\_\_\_\_ will return. If the unit's schedule should be changed when we are at sea, you will be notified of the change as soon as our ombudsman can make the information available to you.

I am enclosing a pamphlet that will give you a brief description of the ship. I look forward to meeting you and am pleased to have you both aboard.

Sincerely,

\_\_\_\_\_  
Captain, U.S. Navy  
Commanding Officer