

READINESS AND DEPLOYMENT CHECKLIST

For use of this form, see DA PAM 600-8-101; the proponent agency is DCS, 6-1.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: 10 USC Section 3013, Secretary of the Army; Army Regulation 600-8-101, Personnel Processing (In, Out, and Mobilization) Processing; and EO 9397 (SSN).
PURPOSE: To provide a standardized means to evaluate readiness posture and validate military and non-military personnel for deployment.
ROUTINE USES: The "Blanket Routine Uses" set forth at the beginning of the Army compilation of systems of records notice apply.
DISCLOSURE: Voluntary, However, failure to update and confirm information is correct may impede processing time and deployability status.

**The Readiness and Deployment Checklist is filed in the Deployment Packet to complete the action.
 A copy remains at the losing organization.**

1. DATE (YYYYMMDD)		2. NAME (Last, First Middle)		3. SSN	
4. SERVICE AFFILIATION		5. COMPONENT		6. STATUS	
<input type="checkbox"/> USA	<input type="checkbox"/> USCG	<input type="checkbox"/> ACTIVE	<input type="checkbox"/> TPU	<input type="checkbox"/> RET	7. PLAN PAY/GRADE
<input type="checkbox"/> USN	<input type="checkbox"/> PHS	<input type="checkbox"/> GUARD	<input type="checkbox"/> IRR	<input type="checkbox"/> NG10	
<input type="checkbox"/> USAF	<input type="checkbox"/> NOAA	<input type="checkbox"/> RESERVE	<input type="checkbox"/> IMA	<input type="checkbox"/> NG32	
<input type="checkbox"/> USMC		<input type="checkbox"/> NON-MILITARY	<input type="checkbox"/> AGR		
9. NON-MILITARY STATUS			10. TRAVEL STATUS		8a. MAILING ADDRESS
<input type="checkbox"/> DOD	<input type="checkbox"/> CONTRACTOR	<input type="checkbox"/> AAFES	<input type="checkbox"/> a. UNIT ORDER		8b. E-MAIL ADDRESS
<input type="checkbox"/> DAC	<input type="checkbox"/> RED CROSS	<input type="checkbox"/> OTHER (Specify)	<input type="checkbox"/> b. INDIVIDUAL		
12. JOB TITLE/MOS			13. ASI		11. DATE OF BIRTH (YYYYMMDD)
15. LANGUAGE SPECIALTIES			16. DATE LANGUAGE CERTIFIED (YYYYMMDD)		14. CITIZENSHIP COUNTRY
18. PARENT UNIT			19. DUIC	20. UNIT PHONE NUMBER	
17. DEPLOYMENT COUNTRY			21. DATE OF ARRIVAL IN THEATER		
22. OVERALL STATUS OF EACH SECTION					
a. READINESS CERTIFICATION		b. PERSONNEL		c. CHAPLAIN	
<input type="checkbox"/> NO GO	<input type="checkbox"/> GO	<input type="checkbox"/> NO GO	<input type="checkbox"/> GO	<input type="checkbox"/> NO GO	<input type="checkbox"/> GO
d. ARMY COMMUNITY SERVICE		e. LEGAL		f. SUPPLY AND LOGISTICS	
<input type="checkbox"/> NO GO	<input type="checkbox"/> GO	<input type="checkbox"/> NO GO	<input type="checkbox"/> GO	<input type="checkbox"/> NO GO	<input type="checkbox"/> GO
g. SECURITY		h. TRAINING		i. MEDICAL	
<input type="checkbox"/> NO GO	<input type="checkbox"/> GO	<input type="checkbox"/> NO GO	<input type="checkbox"/> GO	<input type="checkbox"/> NO GO	<input type="checkbox"/> GO
j. DENTAL		k. VISION		l. FINANCE	
<input type="checkbox"/> NO GO	<input type="checkbox"/> GO	<input type="checkbox"/> NO GO	<input type="checkbox"/> GO	<input type="checkbox"/> NO GO	<input type="checkbox"/> GO
SECTION I - DEPLOYMENT VALIDATION					
Part A. Accuracy Statement: I understand I am certified for deployment and to the best of my knowledge, all information contained in this document is correct and current.					
1. SIGNATURE OF DEPLOYEE			2. RANK		3. TITLE
Part B. Commanders Acknowledgement: (Commanders may approve a non-deployable individual for deployment based on the certifying official's recommendation, criticality, and mission needs, unless otherwise indicated.) I Acknowledge the SRP Site's findings.					
4. PRINTED NAME (CDR OR AG)			5. RANK		6. TITLE
7. SIGNATURE			8. ADDRESS		
9. PHONE NUMBER		10. E-MAIL ADDRESS		11. DSN	
12. FAX PHONE NUMBER		Part C. Deployment Validation: ALL READINESS requirements are updated and all DEPLOYMENT (theater specific) requirements are completed.			
13. PRINTED NAME OF VALIDATING DEPLOYMENT OFFICIAL			14. RANK		15. TITLE
16. SIGNATURE OF VALIDATING DEPLOYMENT OFFICIAL			17. ADDRESS		
18. PHONE NUMBER		19. E-MAIL ADDRESS		20. FAX PHONE NUMBER	
21. DATE (YYYYMMDD)					

NAME (Last, First, Middle)	DEPLOYMENT VALIDATION				SSN
	ITEM	NA	GO	NO GO	DATE(YYYYMMDD)
Section II - Personnel					
1. Emergency Data Record, DD Form 93, review and update (initial and date copy)					
2. SGLV Form 8286 and 8286A, FEGLI review and update (initial and date copy)					
3. ID Tags (two TAG sets w/chains)					
4. Common Access Card: DD Form 2 (active/reserve), DD Form 1173, 1173-1 issued/DEERS update					
5. ETS/ESA date pending within deployment period					
6. Permanent Physical Profile 3 or 4 (MMRB pending or complete)					
7. Dual Military or Single Parent in adoption process (waivable)					
8. Mother of newborn (first 4 months) (waivable)					
9. Conscientious objector status: pending = GO, approved = consider duty restrictions					
10. BT/AIT or equivalent training completed (includes OBC, WOBC)					
11. All previous discharge certificates (DD Forms 214 or 220), if applicable					
12. Mobilization Orders (RC only upon alert)					
13. Deployment information input into the Army Civilian Tracking System (DA Civilian Only)					
14. Passport or Visa requested or in possession, if required (carried by person)					
15. Sole surviving son or daughter (waivable)					
16. Turkish or German citizen deploying through/to that country					
17. Former Peace Corps member (for deployment country only)					
18. Former hostage/POW in deployment area (waivable)					
19. Approved Family Care Plan, DA Form 5305-R, if required					
20. PERSTEMPO input as required					
21. DD Form 2365, Emergency Essential Mobility Agreement (DA Civilians Only)					
22. Lautenberg Amendment					
23. Age 18 Standard for participation in combat					
24. Civilian Employment Information (CEI)					
25. ACAP Pre-Separation Counseling (AC Only)					
26. eMILPO Transaction completed					
Section III - Chaplain					
1. Appointment or visit, if requested					
Section IV - Army Community Service (ACS)					
1. Family Readiness Group or ACS information provided					
Section V - Legal					
1. Premobilization Legal Briefing					
Section VI - Supply And Logistics					
1. Personal military clothing, basic issue or like quantities					
2. Organizational clothing and equipment issued for assignment					
3. Personnel Protective Equipment on-hand					
4. DD Form 2506, government provided storage of personnel items (Military Only)					
5. Weapon Issued, if applicable - Serial Number:					
6. Theater specific clothing issued					
7. Theater specific equipment issued					
Section VII - Security					
1. Security clearance meets requirement for duty position					
2. Security clearance meets requirement for deployment position					
Section VIII - Training					
1. Weapons qualification, if applicable					
2. Military Drivers License (OF 346) issued, if applicable					
3. Force Protection Training administered					
4. Media Awareness Training					
5. Theater specific training completed					
6. Personnel Recovery Education and Training					
7a. UCMJ/MEJA Briefing					

NAME (Last, First, Middle)	DEPLOYMENT VALIDATION				SSN
	NA	GO	NO GO	DATE(YYYYMMDD)	
7b. Terrorist Briefing					
7c. Geneva Conventions Briefing					
7d. Law of Land Warfare Briefing					
7e. Service Member's Civil Relief Act Briefing					
7f. Uniformed Services Employment and Re-employment Act Briefing					
7g. ESGR Briefing					
7h. Medical Threat Briefing					
7i. OPSEC/SAEDA Briefing					
7j. Safety and Local Laws Briefing					
Section IX - Medical					
1. Immunizations current					
2. Current DA Form 7349 on-hand and Soldier found qualified (USAR only)					
3. HIV-1 Antibody test within 2 years of deployment or sample collected					
4. DNA sample on file or collected and forwarded to AFIP					
5. Exceptional Family Member					
6. Medical Record Review (DD Form 2807-1 and DD Form 2808)					
7. Pregnancy test within 30 days of deployment					
8. Issue and fit combat arms, triple-flange, or quad-flange earplugs with carrying case					
9. Hearing aid with extra batteries, if applicable					
10. Physical profile, DA Form 3349 (Temporary or Permanent profile that restricts deployment)					
11. Prescriptions, sufficient supply (minimum 180-day if OCONUS)					
12. Medical Warning Tags on-hand or ordered					
13. Valid DD Form 2215, ref. Audiogram or DD Form 2216, Periodic Audiogram (w/in 12 mo.) on file in HREC					
14. Completion of DD Form 2766 (Audit preventive and chronic flow sheet)					
15. Completion of DD Form 2795					
16. Tuberculosis skin testing (TST) (within 12 months of deployment, if required)					
17. G-6 PD test, if required					
18. Female - Valid Pap Smear results (within 12 months of deployment)					
Section X - Dental					
1. Dental Readiness Classification (1 or 2 = GO; 3 or 4 = NOGO)					
Section XI - Vision					
1. Vision Readiness Classification (1 or 2 = GO; 3 or 4 = NOGO)					
Section XII - Finance					
1. Finance Entitlement and Travel Briefing					
2. Print or review the Soldier's Master Military Pay Account					
3. Perform Pay Account Verification with each Soldier					
4. Complete Finance Mobilization/Demobilization Documentation Requirements Checklist					
5. Prepare Finance Mobilization Packets					