



11. Required clothing and equipment are in the possession of the Marine. Marines are required to possess the minimum uniform requirements as contained in MCBul 10120 published annually by HQMC. \_\_\_\_\_
12. If move causes second dislocation allowance within the same fiscal year, has approval by CMC (MMOS) been received? \_\_\_\_\_
13. If transfer orders state a passport requirement, the individual/family member(s) have made application. (MCO 5512.4) \_\_\_\_\_
- 14- If the Marine requires lenses, duplicate spectacles have been issued. A Marine who meets the defective vision criteria and who is scheduled for assignment to an FMF organization outside CONUS has been issued optical inserts for the field protective mask. If, these inserts are not in the Marine's possession, they will be requisitioned and forwarded to the Marine's new FMF duty station. Include a statement to this effect in the Marine's orders. \_\_\_\_\_
15. A copy of the orders has been provided to the Marine's new duty station, complete with receiving endorsement containing name, address, and relationship of next of kin. \_\_\_\_\_
16. Marine has been interviewed and, if appropriate, afforded an opportunity to:
- a. apply for BAQ \_\_\_\_\_
  - b. register allotments \_\_\_\_\_
  - c. prepare a will \_\_\_\_\_
  - d. subscribe to or change beneficiaries of commercial/government insurance (verify names/addresses with the RED) \_\_\_\_\_
  - e. prepare a power of attorney \_\_\_\_\_
17. Marine is medically qualified for duty overseas. \_\_\_\_\_
18. Marine has the required obligated active service remaining to complete the prescribed tour of duty. \_\_\_\_\_
19. Has the Marine waived his/her right not to be involuntarily assigned to a dependents-restricted tour of duty until 24 months have passed since establishment of an OCD? \_\_\_\_\_
20. Involuntary Dependents-Restricted Assignment.
- a. If the Marine is a careerist, has he/she: waived his/her right not to be involuntarily assigned to a PCS dependents-restricted tour of duty until at least 12 months have elapsed following his/her return from a 5 month or more FMF TAD deployment? \_\_\_\_\_
  - b. If the Marine is a first-termer, has he/she waived his/her right not to be involuntarily assigned to a PCS dependents-restricted tour of duty until at least 6 months have elapsed following his/her return from a 5 month or more FMP TAD deployment? \_\_\_\_\_
21. Marine possesses a primary MOS above basic level. \_\_\_\_\_
22. Request for overseas area clearance (entry approval) for family members has been made. when appropriate, and PCS orders have been endorsed per MCO P1000.6 to reflect entry approval/denial. \_\_\_\_\_
23. Port call requested per MCO 4650.30. \_\_\_\_\_

24. The PCS orders have been endorsed to describe the overseas transportation arrangement (port call), reporting requirements, and transportation document for the carrier. \_\_\_\_\_

25. Ensure personnel authorized transportation of family members to the overseas duty station at Government expense have necessary obligated active service remaining to complete accompanied by dependents tour unless they elect an unaccompanied tour; PCS orders endorsed accordingly. \_\_\_\_\_

26. Family members traveling to overseas station have received necessary immunization/possess immunization record. Family members have been medically screened and physically qualified for overseas residence. (Family members accompanying Marines to HI and AK are exempt from this screening requirement.) \_\_\_\_\_

27- Corporals and below ordered to an accompanj-ed overseas tour will be screened using the financial statement contained in this checklist to determine whether or not the Marine can meet the financial rigors of the. new duty station. Family Service Centers can provide up-to-date information on the facilities, services, and costs available at most overseas locations. \_\_\_\_\_

28. Marine has completed Level I Anti-terrorism - Force Protection (AT-FP) training. \_\_\_\_\_

---

### CERTIFICATION

To my knowledge I certify that as of \_\_\_\_\_ I have no problems which would preclude my assignment to a restricted area.

28. Marine has completed Level I Anti-terrorism - Force Protection (AT-FP) training. \_\_\_\_\_

---

Signature

COMMANDING OFFICER CERTIFICATION

To my knowledge I certify that he/she is qualified/unqualified for overseas ssignment.  
If unqualified, list reasons (be specific):

---

---

---

---

---

Signature

Printed Name

Billet

THIS PAGE BLANK

APPENDIX B

FINANCIAL STATEMENT FOR CORPORALS AND BELOW ORDERED  
TO AN ACCOMPANIED OVERSEAS TOUR

1. It is the intent of this screening to preclude the assignment to accompanied overseas tours of junior Marines who are unable to meet the financial demands of that duty station. Although it would be convenient to provide a fixed, minimum net available funds to qualify for all assignments, the variety of circumstances found at different overseas locations (to include spousal employment opportunity), compounded by the changing exchange rates, make this impractical. Commanding officers must therefore use their judgment as to the ability of the Marine in question to successfully complete the prescribed tour length. If, in the commanding officer's opinion, this is not the case; notify CMC (MMEA) by message of that fact and request modification of the existing orders.

2. Disclosure of information on this form is mandatory. Possible adverse effects of nondisclosure would be the assignment of the Marine on an accompanied overseas tour without consideration of information which, if known, might preclude that assignment. The information solicited by this form is not to be included in any official system of records. After processing, it shall be destroyed by the commanding officer or returned to the Marine. Nondisclosure may result in disciplinary action.

\_\_\_\_\_  
(GRADE) (LAST NAME) (FIRST) (MI) (SSN/MOS)

MONTHLY INCOME MONTHLY DEDUCTIONS

BASE PAY \$ \_\_\_\_\_ FED TAX \$ \_\_\_\_\_

BAQ \$ \_\_\_\_\_ STATE TAX \$ \_\_\_\_\_

COMRATS \$ \_\_\_\_\_ PICA \$ \_\_\_\_\_

OTHER INCOME (itemized) ALLOTMENTS 1/ (itemized)  
\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

TOTAL MONTHLY INCOME TOTAL MONTHLY DEDUCTIONS  
\$ \_\_\_\_\_ \$ \_\_\_\_\_

B-6

MARINE CORPS PERSONNEL ASSIGNMENT POLICY

MONTHLY CREDIT PAYMENTS

(Name of creditors) 2/	Monthly Payment	Balance
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

TOTALS

TOTAL MONTHLY INCOME \$ \_\_\_\_\_

MINUS

TOTAL MONTHLY DEDUCTIONS \$ \_\_\_\_\_

NET INCOME \$ \_\_\_\_\_

MINUS

TOTAL MONTHLY CREDIT PAYMENTS \$ \_\_\_\_\_

NET AVAILABLE FUNDS

(to cover housing, food, & other living expenses) 3/ \$ \_\_\_\_\_

1/ Do not include allotments to family members residing with the Marine or allotments for personal savings accounts or savings bonds.

2/ Include mortgage payments if home is to be retained upon transfer and include estimated rental income under "Monthly Income". Do not include those creditors who are paid by allotment and listed under "Monthly Deductions".

3/ Special consideration may be necessary in cases of exceptional family circumstances (e.g., parental support or unique family medical requirement) as to the actual and available funds that can be applied to living expenses.