

## DEPLOYMENT CYCLE SUPPORT (DCS) CHECKLIST

For use of this form, see AR 600-8-101; the proponent agency is DCS, G-1.

### DATA REQUIRED BY THE PRIVACY ACT OF 1974

**AUTHORITY:** Title 10 USC, Section 3013, Secretary of the Army; AR 600-8-101, Personnel Processing (In, Out, Soldier Readiness, and Deployment Cycle).

**PURPOSE:** To provide a standardized means to validate Soldiers, DA Civilians, and Families for deployment cycle support and unit reconstitution.

**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 that information is correct may impede processing time and DCS status of individual.

**DA Form 7631 is filed in the deployment packet to complete the action. Commanders maintain a copy in the Soldiers personnel files for no less than 1 year. Soldiers who PCS will hand carry a copy to the gaining command. A copy remains at the losing organization for 6 months.**

1. DATE (YYYYMMDD)		2. NAME (Last, First, MI)	
3. SERVICE AFFILIATION <input type="checkbox"/> USA <input type="checkbox"/> USMC <input type="checkbox"/> PHS <input type="checkbox"/> USN <input type="checkbox"/> USCG <input type="checkbox"/> NOAA <input type="checkbox"/> USAF		4. COMPONENT <input type="checkbox"/> ACTIVE <input type="checkbox"/> RESERVE <input type="checkbox"/> GUARD <input type="checkbox"/> NONMILITARY	
5. STATUS <input type="checkbox"/> TPU <input type="checkbox"/> AGR <input type="checkbox"/> NG32 <input type="checkbox"/> IRR <input type="checkbox"/> RET <input type="checkbox"/> IMA <input type="checkbox"/> NG10		6. PAY PLAN/GRADE  7. MOBILIZATION DEPLOYMENT CENTER	
8. NONMILITARY STATUS <input type="checkbox"/> DOD <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> AAFES <input type="checkbox"/> DAC <input type="checkbox"/> RED CROSS <input type="checkbox"/> OTHER (Specify)		9. TRAVEL STATUS <input type="checkbox"/> a. UNIT ORDER <input type="checkbox"/> b. INDIVIDUAL	
10. DATE OF BIRTH (YYYYMMDD)		11. ARMY COMMANDS	
12. DATE ARRIVED IN THEATER (YYYYMMDD)		13. CITIZENSHIP COUNTRY	
14. REDEPLOYMENT DATE (YYYYMMDD)		15. REFRAD DATE (YYYYMMDD)	
16. DEPLOYMENT COUNTRY		17. PARENT UIC	
18. DUIC		19. UNIT DSN PHONE NUMBER	
20. CONUS REPLACEMENT CENTER		21. STATUS OF EACH DCS STAGE and COMMANDER'S VALIDATION MEMO (C= completed; NC = not completed)	
a. RESET <input type="checkbox"/> C <input type="checkbox"/> NC		b. TRAIN-READY <input type="checkbox"/> C <input type="checkbox"/> NC	
c. AVAILABLE <input type="checkbox"/> C <input type="checkbox"/> NC		d. CDR VALIDATION MEMO AFTER RESET <input type="checkbox"/> C <input type="checkbox"/> NC	

### DCS VALIDATION

**Part A - Accuracy Statement:** I understand I am certified for reconstitution and, to the best of my knowledge, all information contained in this document is correct and current.

1. NAME (Individual)	2. RANK	3. TITLE	4. SIGNATURE	5. DATE (YYYYMMDD)
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**Part B. First Line Leader/Immediate Supervisor's Authentication.** I have authenticated the information contained in this checklist as correct and current.

6. NAME (Supervisor)	7. RANK	8. TITLE
9. UNIT/ADDRESS		10. EMAIL ADDRESS
11. PHONE/DSN NUMBER	12. FAX NUMBER	13. SIGNATURE
		14. DATE (YYYYMMDD)

**Part C - Commander's Acknowledgment:** (Commanders may approve an individual for reconstitution based on the certifying official's recommendation criticality, and mission needs, unless otherwise indicated.) acknowledge the checklist findings.

15. NAME (CDR or AG)	16. RANK	17. TITLE
18. UNIT/ADDRESS		19. EMAIL ADDRESS
20. PHONE/DSN NUMBER	21. FAX NUMBER	22. SIGNATURE
		23. DATE (YYYYMMDD)

**Part D - DCS Validation (Next level of Command):** ALL DEPLOYMENT CYCLE SUPPORT requirements are updated and completed.

24. NAME (Validating Official)	25. RANK	26. TITLE
27. UNIT/ADDRESS		28. EMAIL ADDRESS
29. PHONE/DSN NUMBER	30. FAX NUMBER	31. SIGNATURE
		32. DATE (YYYYMMDD)

NAME (Last, First MI)				
DEPLOYMENT CYCLE SUPPORT TASKS	DCS VALIDATION			
	COMPLETED	NOT COMPLETED	NA	DATE (YYYYMMDD)
<b>ARFORGEN CYCLE 1 - RESET</b>				
<b>Unit Commander/Unit Leadership (Proponent: Commander/Leadership)</b>				
Single Soldiers identified and support ensured.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sexual Harassment/Assault Response and Prevention (SHARP) training conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FRG assessed, trained, and resourced.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers counseled on requirement to provide financial support to Family while deployed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers identified with potential financial issues referred to financial training or assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Substance Abuse briefing conducted (also prior to any leave period - emergency, regular, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Risk Reduction Reintegration Tip Card utilized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Reunion and homecoming ceremonies planned and coordinated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Post-Deployment Resilience Training for Soldiers (Reintegration) conducted NLT 30 days after redeployment (in conjunction with PDHA) (ICW MEDCOM-Behavioral Health, if possible).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Post-Deployment Resilience Training for Soldiers (3-6 Month Post-Deployment) conducted NLT 90-180 days after redeployment (ideally before completing PDHRA) (ICW MEDCOM-Behavioral Health, if possible).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers and DA Civilians encouraged to communicate with Family throughout the deployment cycle.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safety briefings conducted on POV, motorcycle, seasonal driving, etc. (also prior to any leave).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Operator licenses, registrations, insurance policies, and safety inspections verified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldier for Life - Transition Assistance services provided to affected Soldiers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Preseparation counseling (DD Form 2648-1 TEST) for RC Soldiers conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Command Climate Survey conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
RC Soldiers reintegrated into civilian workplaces.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Reintegration - Unit Risk Inventory (URI) conducted 30-180 days after redeployment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Two Unit Prevention Leaders (UPLs) trained and certified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Army Substance Abuse Program (ASAP) Base Area Code Managers (BACM) identified and trained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers who PCS and TCS complete the DCS process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Personnel Service Center/Unit S-1/Civilian Personnel Advisory Center (Proponent Agency: DCS, G-1)</b>				
Eligibility for overseas deployment per AR 40-501, AR 614-30 and COCOM guidance ensured/verified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers and Family members educated regarding the impact of personnel policies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
RC Soldiers reenrolled in MGIB and state institution assistance programs coordinated with S-1/MILPO.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
RC Soldiers advised on 18-Year Sanctuary policy (10 USC, Sec 12686) coordinated with S-1/MILPO.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MMRB, MEB, PEB conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Final check completed to ensure Soldier has processed correctly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Unit Ministry Team/Installation Chaplain (Proponent Agency: Chief of Chaplains)</b>				
Suicide Awareness and Prevention training conducted (Families authorized and encouraged to attend).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Families identified with reported redeployment stress.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Small group discussion facilitated on deployment experiences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Operation READY Reunion/Reintegration training for Soldiers and DA Civilians conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Spouses provided opportunity to take marital assessment instrument.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldier provided opportunity to complete marital assessment instrument.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

NAME (Last, First Middle)				
Deployment Cycle Support Tasks	DCS VALIDATION			
	COMPLETED	NOT COMPLETED	NA	DATE (YYYYMMDD)
<b>ARFORGEN CYCLE 1 - RESET</b>				
<b>Unit Ministry Team / Installation Chaplain (Continued)</b>				
Opportunity provided for voluntary marriage education/enrichment workshops.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suicide Intervention Skills Training for Leaders and Gatekeepers conducted (Families authorized and encouraged to attend).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers with behavioral or health issues referred for all psycho-social risk behaviors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SIGNATURE OF CERTIFYING OFFICIAL	RANK/TITLE		DATE (YYYYMMDD)	
<b>Medical/ Dental Health Teams (Proponent Agency: OTSG/MEDCOM)</b>				
Leader training on symptoms of distress and suicide tendencies conducted (Families authorized and encourage to attend).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Leader training on symptoms of distress and suicide tendencies conducted (Families authorized and encouraged).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers with behavioral or health issues referred for all Psycho-Social Risk Behaviors (Behavioral Health, Medical, Alcohol/Substance Abuse Records not to be included and processed with DCS checklist requirements).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Behavioral health assessments conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
TRICARE benefits briefing conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Health Threat briefing for childcare providers coordinated with and conducted by medical personnel.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Health Threat briefing for spouses coordinated with and conducted by medical personnel.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Medical Threat briefing for Soldiers and DA Civilians conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Negative health-related behaviors treated and documented (DD Form 2796) NLT 30 days after redeployment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Health care extension to DA Civilians for deployment related conditions coordinated with CPOC.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Health concerns documented and referred (DD Form 2900) within 90-180 days after redeployment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Military Pay Office (Proponent Agency: DPMO)</b>				
Current status of DoD charge card holders reviewed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Travel pay settled for Soldiers with TCS orders.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Finance briefings conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Allotment changes expedited.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BAH for AGR soldiers adjusted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Legal Assistance Office (Proponent Agency: OTJAG)</b>				
Soldier Legal Readiness Education: wills, powers of attorney; advanced medical directives/living wills provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldier Legal Readiness Education: Uniformed Services Employment and Reemployment Rights Act (USERRA).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldier Legal Readiness Education: Service Members Civil Relief Act (SCRA) & personal income taxes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Legal Assistance on military and civil matters, including problems resulting from mobilization or deployment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Family Legal Readiness Education provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Claims for lost, damaged, or destroyed personal property incident to Service (DD Form 1840/1840R submitted).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

NAME (Last, First Middle)				
Deployment Cycle Support Tasks	DCS VALIDATION			
	COMPLETED	NOT COMPLETED	NA	DATE (YYYYMMDD)
<b>ARFORGEN CYCLE 1 - RESET</b>				
<b>Installation Management Command (Proponent Agency: IMCOM)</b>				
Family Readiness staff shortages (ACS/FAC) identified, as required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Families with major problems requiring special assistance identified and referred.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Family members provided toll free numbers to ACS and FAC.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AC and RC Family Readiness groups educated on available services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Families educated about services provided through Military OneSource.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Family Advocacy Program (FAP) manager/State Family Program Director (SFPD) case continuity reestablished at home station; Soldier and Family status reviewed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Employers involved in home station activities and reunion activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Education and information materials provided to IRR/IMA Families.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
DCS information provided to Family members.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
DA civilians referred to the employee assistance program coordinator.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
DA civilians informed of the office of worker's compensation programs process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Operation READY reunion/reintegration training for Families conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Operation READY communication with spouses, Families, and children training for Soldiers and DA civilians.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Post-Deployment Resilience training for spouses/couples completed (ICW with Medical/Chaplain).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
In/Out-processing checks: ensure behavioral health, ASAP, social work service, & Family advocacy coordinated for continuity of care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SIGNATURE OF CERTIFYING OFFICIAL	RANK/TITLE		DATE (YYYYMMDD)	
<b>ARFORGEN CYCLE 2 - TRAIN-READY</b>				
<b>Unit Commander/Unit Leadership (Proponent: Commander/Leadership)</b>				
Single Soldiers identified and support ensured.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sexual Harassment/Assault Response and Prevention (SHARP) training (Host country, risk reduction) conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FRG assessed, trained, and resourced.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
RDC has completed all training prior to unit deployment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Deploying Soldiers with profiles/deployment-limiting conditions counseled on duties they may/may not perform.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Family Care Plan, including unit readiness goals, updated and current.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers counseled on requirement to provide financial support to Family while deployed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers identified with potential financial issues referred to financial training or assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Substance abuse briefing conducted (also prior to any leave period - emergency, regular, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers and DA Civilians encouraged to communicate with Family throughout the deployment cycle.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
"Taking care of business" personal readiness video, commander's brief, & checklist education conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pre-Deployment Resilience training for Leaders conducted (ICW MEDCOM-Behavioral Health/OCCH).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pre-Deployment Resilience training for Soldiers conducted (ICW MEDCOM-Behavioral Health/OCCH).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safety briefings conducted on POV, motorcycle, seasonal driving, etc. (also prior to any leave).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

NAME (Last, First Middle)				
Deployment Cycle Support Tasks	DCS VALIDATION			
	COMPLETED	NOT COMPLETED	NA	DATE (YYYYMMDD)
<b>ARFORGEN CYCLE 2 - TRAIN-READY</b>				
<b>Unit Commander/Unit Leadership (Proponent: Commander/Leadership) (Continued)</b>				
Soldier for Life - Transition Assistance Preseparation Briefing (DD Form 2648) for Stop-Loss Soldiers (IAW MILPER MSG 06-232) conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Command climate survey conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Unit Risk Inventory (URI) conducted NLT 30 days prior to deployment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Two Unit Prevention Leaders (UPLs) trained and certified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Army Substance Abuse Program (ASAP) Base Area Code Managers (BACM) identified and trained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers who PCS and TCS complete the DCS process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Personnel Service Center/Unit S-1/Civilian Personnel Advisory Center (Proponent Agency: DCS, G-1)</b>				
ALARACT 058/2009 - New Personnel Processing Requirement: DD Form 93, Training Video completed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Eligibility for overseas deployment per AR 40-501, AR 614-30 and COCOM guidance ensured and verified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers and Family members educated regarding the impact of personnel policies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
RC Soldiers advised on 18-Year Sanctuary Policy (10 USC, Sec 12686).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MMRB, MEB, PEB conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Final check completed to ensure Soldier has processed correctly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Unit Ministry Team/Installation Chaplain (Proponent Agency: Chief of Chaplains)</b>				
Suicide awareness and prevention training conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Families identified with reported redeployment or predeployment stress.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Small group discussion facilitated on deployment experiences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Spouses provided opportunity to take marital assessment instrument.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldier provided opportunity to complete marital assessment instrument.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Opportunity provided for voluntary marriage education/enrichment workshops.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suicide intervention skills training for Leaders and Gatekeepers conducted (Families authorized and encouraged to attend).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers referred with identified medical or behavioral health issues for all psycho-social risk behaviors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Medical/Dental Health Teams (Proponent Agency: OTSG/MEDCOM)</b>				
Leader training on symptoms of distress and suicide tendencies coordinated with installation medical personnel or Chaplain (Families authorized and encouraged to attend).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers with behavioral or health issues referred for all psycho-social risk behaviors (behavioral health, medical, alcohol/substance abuse records not to be included and processed with DCS Checklist requirements).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Behavioral health assessments conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
TRICARE benefits briefing conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Medical threat briefing for Soldiers and DA Civilians conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SIGNATURE OF CERTIFYING OFFICIAL	RANK/TITLE		DATE (YYYYMMDD)	

NAME (Last, First Middle)				
Deployment Cycle Support Tasks	DCS VALIDATION			
	COMPLETED	NOT COMPLETED	NA	DATE (YYYYMMDD)
<b>ARFORGEN CYCLE 2 - TRAIN-READY</b>				
<b>Military Pay Office (Proponent Agency: DPMO)</b>				
Current status of DoD charge card holders reviewed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Travel pay settled for Soldiers with TCS orders.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Finance briefings conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Allotment changes expedited.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BAH for AGR Soldiers adjusted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Eagle Cash Store Value Card (SVC) issued.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Legal Assistance Office (Proponent Agency: OTJAG)</b>				
Soldier Legal Readiness Education: wills, powers of attorney; advanced medical directives/living wills provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldier Legal Readiness Education: Uniformed Service Employment and Reemployment Rights Act.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldier Legal Readiness Education: Service Members Civil Relief Act (SCRA) & personal income taxes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Legal assistance on military and civil matters, including problems resulting from mobilization or deployment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Family Legal Readiness Education coordinated with and conducted by installation SJA or legal counsel.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Claims for Lost, Damaged, or Destroyed Personal Property incident to Service (DD Form 1840/1840R).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Installation Management Command (Proponent Agency: IMCOM)</b>				
Family Readiness staff shortages (ACS/FAC) identified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Families with major problems requiring special assistance identified and referred.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Family members provided toll-free number to ACS and FAC.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AC and RC Family Readiness Groups educated on available services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Family educated about services provided through Military OneSource.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Education and information materials, to include DCS and Army OneSource sites, provided to IRR/ IMA Families.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pre-Deployment Resilience Training for Spouses/Couples completed coordinated through installation medical or chaplain personnel.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Operation READY deployment and children training coordinated through installation medical or Chaplain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Financial management planning for deployments training coordinated through installation finance or ACS.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
In Out-processing checks: ensure behavioral health, ASAP, social work service, & Family advocacy coordinated for continuity of care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SIGNATURE OF CERTIFYING OFFICIAL	RANK/TITLE		DATE (YYYYMMDD)	
<b>ARFORGEN CYCLE 3 - AVAILABLE</b>				
<b>Unit Commander/Unit Leadership (Proponent: Commander/Leadership)</b>				
Sexual Harassment/Assault Response and Prevention (SHARP) training (Host Country, risk reduction) conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers counseled on requirement to provide financial support to Family while deployed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers identified with potential financial issues referred to financial training or assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Substance Abuse briefing conducted for R&R personnel.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

NAME (Last, First Middle)				
Deployment Cycle Support Tasks	DCS VALIDATION			
	COMPLETED	NOT COMPLETED	NA	DATE (YYYYMMDD)
<b>ARFORGEN CYCLE 3 - AVAILABLE</b>				
<b>Unit Commander/Unit Leadership (Proponent: Commander/Leadership) (Continued)</b>				
Provide RDC updated redeployment rosters during RIP/TOA.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Risk Reduction Reintegration Card utilized for R&R personnel.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers and DA Civilians encouraged to communicate with Family throughout the deployment cycle.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safety briefings conducted on POV, motorcycle, seasonal driving, etc. for R&R personnel.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Command Climate Survey conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers who PCS and TCS complete the DCS process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Personnel Service Center/Unit S-1/Civilian Personnel Advisory Center (Proponent Agency: DCS, G-1)</b>				
MMRB, MEB, PEB conducted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Unit Ministry Team / Installation Chaplain (Proponent Agency: Chief of Chaplains)</b>				
Suicide awareness and prevention training conducted for R&R personnel before and after leave.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suicide awareness and prevention training conducted for Family members of R&R personnel (authorized and encouraged to attend at home station).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Families identified with reported deployment stress/separation issues.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Small group discussion on deployment experiences coordinated with and facilitated by unit/installation Chaplain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Operation READY reunion/reintegration training for Soldiers and DA Civilians conducted prior to R&R.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Spouses provided opportunity to take marital assessment instrument.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldier provided opportunity to complete marital assessment instrument.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldiers referred with identified medical or behavioral health issues for all psycho-social risk behaviors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Medical/Dental Health Teams (Proponent Agency: OTSG/MEDCOM)</b>				
Soldiers with behavioral or health issues referred for all psycho-social risk behaviors (behavioral health, medical, alcohol/substance abuse records not to be included and processed with DCS Checklist requirements).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Legal Assistance Office (Proponent Agency: OTJAG)</b>				
Soldier Legal Readiness Education: wills, powers of attorney; advanced medical directives/living wills provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldier Legal Readiness Education: Uniformed Service Employment and Reemployment Rights Act.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Soldier Legal Readiness Education: Service Members Civil Relief Act (SCRA) & personal income taxes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Legal Assistance on military and civil matters, including problems resulting from mobilization or deployment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Family Legal Readiness Education provided.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Claims for Lost, Damaged, or Destroyed Personal Property incident to Service (DD Form 1840/1840R).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Installation Management Command (Proponent Agency: IMCOM)</b>				
Family Readiness staff shortages (ACS/FAC) identified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Families with major problems requiring special assistance identified and referred.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AC and RC Family Readiness Groups educated on available services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Families educated about services provided through Military OneSource.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Education and information materials provided to IRR/IMA Families.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
DCS information provided to Family members.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

NAME (Last, First Middle)				
Deployment Cycle Support Tasks	DCS VALIDATION			
	COMPLETED	NOT COMPLETED	NA	DATE (YYYYMMDD)
ARFORGEN CYCLE 3 - AVAILABLE				
Installation Management Command (Proponent Agency: IMCOM) (Continued)				
Operation READY reunion/reintegration training for Families conducted (prior to R&R leave).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Operation READY deployment and children training conducted (prior to R&R leave).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
In-Out Processing checks: ensure behavioral health, ASAP, social work service, & Family advocacy coordinated for continuity of care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SIGNATURE OF CERTIFYING OFFICIAL	RANK/TITLE			DATE(YYYYMMDD)
REMARKS				