MEMORANDUM FOR OASD/RA

SUBJECT: Request for Approval to Conduct the Following Civil-Military FY99 Training

1. Reference: DoD Directive 1100.20 dated January 30, 1997, Subj: Support and Services for Eligible Organizations and Activities Outside the Department of Defense, and OASD/RA Memorandum, Subj: DoD Innovative Readiness training Project Submissions for Fiscal Year 1999

2. DoD Civil-Military Innovative Readiness Training (IRT) Program Category:

a. Engineering/Infrastructure: _____
b. Medical/Healthcare/Dental and Human Services _____
c. Transportation/Other/or Combined (Specify) _____

3. NAME , DESCRIPTION, LOCATION(s) and DATE(s) of project:

4. Identify All DoD Service/Component Personnel Participating:

____Army	____Navy	____Air Force	____Coast Guard
____Army National Guard	____Navy Reserve	____Air National Guard	____Coast Guard Reserve
____Army Reserve	____Marine Corps	____Air Force Reserve	____Marine Corps Reserve

5. Military Officer Responsible for executing the project:

_____

Rank Name Service/Component Office Telephone #

6. Participating Community, Business, Federal or State Government entity:

7. Civilian Official Requesting Military Assistance/Support: (ATTACH Support Request to Submission)

_____

Name Organization Address Telephone #

8. Service/Component Coordination:
(NOTE: DO NOT forward to OASD/RA for approval without these coordinations)

a. Legal Review _____
b. Federal Budget Officer/USPFO _____
c. Operations and Training Officer _____
d. Medical Corps Officer _____
e. State Adjutant General _____
f. Inter-governmental (if applicable)_____

9. Certification of Non-competition with other available public and/or private sector agencies:
(ATTACH to submission)

10. <u>If Applicable</u>: (ATTACH to submission)

a. Appropriate Environmental Protection Documentation
b. Coordination with Army Corps of Engineers
c. Land Use Agreement

11. Military healthcare/medical personnel participating in the project:

a. How many will participate?
b. Will they be treating DoD healthcare beneficiaries?
c. What duties will they perform?

12. <u>Mission Essential Training</u> Requirements/Objectives (List Individual and/or Unit)**:**

13. Funding Requirements:

IMPORTANT NOTE: Identify each Service/Component and a Fiscal Point of Contact for IRT funding from OASD/RA

a**. Service/Component Contribution**:

(1) Lead Military Agent:_____

(a) O&M: _____ (b) MP&A/RP&A: _____ Total: _____

b. **Participating Service/Component Contribution**: (Use an additional sheet to list more for (b) (c) and (d))

(1) _____

(a) O&M: _____ (b) MP&A/RP&A: _____ Total: _____

(2) _____

(a) O&M: _____ (b) MP&A/RP&A: _____ Total: _____

c. **Requested Additional/Incremental Funding from OASD/RA:**

(1) Lead Military Agent:

(a) O&M: _____ (b) MP&A/RP&A: _____ Total: _____

(2) Participating Service/Component (1):

(a) (O&M: _____ (b) MP&A/RP&A: _____ Total: ____ _____

(3) Participating Service/Component (2):

(a) O&M: _____ (b) MP&A/RP&A: _____ Total: _____

d. Points of Contact by Organization to receive funds from OSD :

(1) POC: _____

(2) POC: _____

(3) POC: _____

14. Authorization. All requirements have been met in accordance with the IRT submission package guidelines and DoD Directive 1100.20 dated January 30, 1997. There is no significant increase in training cost to conduct this project.

_____

Signature of General/Flag Level Commander Date