

REQUEST FOR USAF SPECIALIZED SPORTS TRAINING

(See Privacy Act Statement on reverse)

TO <i>UNIT COMMANDER</i>	UNIT	BASE				
As authorized in AFI 34-107, please consider me for participation in USAF-level sports activities in:						
SPORT	POSITION	COMPETITION <i>(Air Force, Armed Forces, or name of other)</i>	DATES OF COMPETITION			
I. PERSONAL DATA						
NAME <i>(Last, first, middle initial)</i>		GRADE	SEX	SOCIAL SECURITY NUMBER		
DATE OF BIRTH <i>(YYYYMMDD)</i>	PLACE OF BIRTH <i>(City, state, country)</i>		U.S. CITIZEN <i>(By birth or naturalization)</i>	PASSPORT NO. <i>(if issued)</i> & EXP. DATE		
WEIGHT	HEIGHT	MARITAL STATUS <i>(Married or single)</i>	ATHLETIC UNIFORM SIZES			
			SWEATS	T-SHIRTS		
PERMANENT HOME ADDRESS <i>(Street, city, state, & zip code)</i>			PRESENT HOME ADDRESS <i>(Street, city, state, & zip code)</i>			
HOME TELEPHONE <i>(Include area code)</i>		HOMETOWN NEWSPAPER <i>(Name and address to include zip code)</i>				
II. MILITARY DATA						
DUTY TITLE		AFSC	FLYING STATUS <i>(Yes or No)</i>	TIME ON STATION	PENDING PCS/TDY	DATE OF SEPARATION
DUTY MESSAGE ADDRESS		DUTY PHONE		SUPERVISOR <i>(Name, grade, and duty phone)</i>		
		AUTOVON				
		COMMERCIAL				
III. SPORTS EXPERIENCE <i>(List experience for sport applied for only)</i>						
AREA OF COMPETITION	SPORT	DATES OF COMPETITION	AWARDS RECEIVED			
HIGH SCHOOL						
COLLEGE						
CIVILIAN						
MILITARY						
IV. SIGNIFICANT PERFORMANCES FOR PAST 3 YEARS						
EVENT	LOCATION	DATE	RESULTS <i>(Times, finish, totals, etc.)</i>			

V. REMARKS AND REFERENCES (If more space is required, use bond paper and attach.)

VI. AFFIDAVIT (Check one)

- I am an 'Amateur' according to the rules of the International Federation governing my sport. I am eligible in all aspects for participation in National or International competition.
- I am NOT an 'Amateur' according to the rules of the International Federation governing my sport; however, I am eligible for National or International competition in my sport.
- I CERTIFY that all the information and data provided are correct and true and that I have read and understand the Privacy Act Statement.

SIGNATURE OF REQUESTER	CURRENT MILITARY ADDRESS (Include zip code.)
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VII. SUPERVISOR'S ENDORSEMENT

TO UNIT COMMANDER	FROM
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Application for specialized training is Approved Disapproved contingent upon current workload and manning. I understand that this individual may be selected for higher level competition and that the host base commander is authorized to extend his/her orders.
(Place an "X" in the appropriate blank.)

DATE	TYPED NAME & GRADE OF SUPERVISOR	SIGNATURE OF SUPERVISOR	DUTY PHONE (AV)
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VIII. COMMANDER'S ENDORSEMENT

TO BASE ATHLETIC COMMANDER	FROM	DUTY PHONE (AV)
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I have reviewed all Quality Force requirements on this individual and recommend Approval Disapproval of this request.
(Place an "X" in the appropriate blank.)

DATE	TYPED NAME & GRADE OF COMMANDER	SIGNATURE OF COMMANDER	DUTY PHONE (AV)
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IX. ATHLETIC DIRECTOR CERTIFICATION

I certify that the statement contained in this application are true and exact to the best of my knowledge. This individual has displayed sufficient competence/skill to compete in the sport of _____ at USAF or higher level.
(List name of sport)

DATE	TYPED NAME & GRADE OF ATHLETIC DIRECTOR	SIGNATURE OF ATHLETIC DIRECTOR	DUTY PHONE (AV)
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X. MAJCOM ENDORSEMENT

I have reviewed this application and recommend approval for USAF or higher level competition.

TO HQ AFMPC/DPMSPF RANDOLPH AFB TX 78150-6001	FROM HQ	TYPED NAME AND SIGNATURE OF MAJCOM REPRESENTATIVE	DATE OF SIGNATURE
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AUTHORITY: 10 U.S.C. 8012, 33 U.S.C. 3101, and EO 9397.
PRINCIPAL PURPOSES: To assist in the identification of individuals desiring specialized sports training, to determine those qualified for such training, and for use the administration of specialized training programs.
ROUTINE USES: To administer specialized training programs. Information on this form, including the SSN, is used to identify individuals desiring specialized training. Information furnished may be disclosed to any DOD component or part thereof, and upon request, to other Federal, state, and local government agencies in the pursuit of their official duties. Information may be released to the United States Amateur Athletic Union, United States Olympic Committee, and to the news media for publicity purposes. It may also be used for other lawful purposes including law enforcement and/or litigation.
DISCLOSURE IS VOLUNTARY: Failure to provide the information, including the SSN, precludes the individual from consideration for specialized sports training.