

**SPONSORSHIP REQUEST FORM**

COMPLETE ALL BLOCKS AND RETURN THIS FORM TO YOUR NEW UNIT ADDRESS:

1. \_\_\_\_\_  
(GRADE) (NAME) (LAST 4 SSN) (MOS)
2. Current unit address: \_\_\_\_\_
3. Unit phone (commercial/DSN): \_\_\_\_\_
4. Current mailing address: \_\_\_\_\_
5. Estimated detachment date: \_\_\_\_\_ Arrival date: \_\_\_\_\_
6. Leave address: \_\_\_\_\_
7. MCC/RUC of new assignment: \_\_\_\_\_  
T/O \_\_\_\_\_ LINE NUMBER \_\_\_\_\_
8. Marital status: \_\_\_\_\_
9. Sex and age of accompanied child(ren): \_\_\_\_\_
10. Anticipated mode of travel: \_\_\_\_\_
11. Are you an Exceptional Family Member Sponsor (EFM): \_\_\_\_\_
12. I do (do not) desire Government quarters (unless mandated by base policy). My family size will require (circle one) 2, 3, or 4 bedrooms. I have/have not forwarded an Application for an Assignment to Military Family Housing, DD form 1746, to the Housing Office.
13. I have \_\_\_\_\_ dog(s) and \_\_\_\_\_ cat(s).
14. Specific information/assistance requested: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Signature)