

DATE STARTED _____

SUITABILITY/OVERSEAS SCREENING

PLEASE PROVIDE THE FOLLOWING INFORMATION:

FMP: _____ **NAME (LAST, FIRST, MI)** _____

RANK/RATE _____ **SPONSOR'S SSN** _____

SPONSOR'S NAME (LAST, FIRST, MI) _____

PHONE (HM) _____ **(WK)** _____ **(CELL)** _____

CURRENT DUTY STATION _____ **(UIC)** _____

NEXT DUTY STATION _____ **(UIC)** _____

EMAIL ADDRESS _____

PLEASE STOP THE FOLLOWING DEPARTMENTS AS DIRECTED:

1. ___ **PHA DESK** – Walk-in basis at Desk B on the 1st floor of the hospital. **ACTIVE DUTY ONLY**
2. ___ **DENTAL** -2nd floor or at Fleet Dental – last sheet will be signed by Dental.
3. ___ **IMMUNIZATIONS** – 1st floor –Please bring medical record. PPDs are not given on Thursdays or Fridays if Monday is a holiday. Yellow fever is given on the last Wednesday of each month 0800-0900.
4. ___ **LAB** – 2ND floor. **ACTIVE DUTY ONLY**

STEPS 1-4 NEED TO BE COMPLETE BEFORE ANY DOCTORS APPOINTMENTS ARE MADE

5. ___ **Arrive at doctor's appointment on the 1st floor 20 minutes early.** (Any changes to your appointment will have to be done by calling Central Appointments at DSN: 315-243-5352 Option#1).
6. ___ **RETURN ALL PAPERWORK TO THE OVERSEAS SCREENING OFFICE-3RD floor, RM 3B33**