



DEPARTMENT OF THE NAVY

NAVY MEDICINE EAST
620 JOHN PAUL JONES CIRCLE
PORTSMOUTH, VIRGINIA 23708-2106

NAVMEDEASTINST 1740.1A

M1A

9 Sep 08

NAVMEDEAST INSTRUCTION 1740.1A

Subj: COMMAND SPONSORSHIP PROGRAM

Ref: (a) OPNAVINST 1740.3B

Encl: (1) Sample "Welcome Aboard" Letter
(2) Sponsor's Information Sheet
(3) Sponsor's Appointing Letter
(4) Sponsor Program Questionnaire

1. Purpose. The Sponsor Program is designed to ensure that all personnel reporting for duty at Navy Medicine East receive a personalized welcome and assistance in their Permanent Change of Station (PCS) move.

2. Cancellation. NAVMEDEASTINST 1740.1

3. Background. One of the most rewarding aspects of Navy life, and one of the primary reasons many of our personnel made the decision to join or remain in the Navy, was the opportunity to travel or live in a variety of areas throughout the world. This incentive can, however be entirely negated by a PCS move if a member is not welcomed aboard the new command in a positive manner. Reference (a) provides requirements and guidance for a sponsor program, although the most effective sponsorship program does not stop until the individual and, when applicable, his/her family are completely integrated into the receiving command and community.

4. Action

a. The Administrative Support Department is responsible for the overall administration of the sponsorship program within the command and is charged with the following responsibilities:

(1) Immediately upon receipt of orders, assign a sponsor of comparable rank/rate and, when possible, from the same department to which the new member will be assigned. Only those "people oriented" members should be assigned as sponsors.

(2) Prepare a "Welcome Aboard" letter enclosure (1) for the Chief of Staff's (CoS) signature. Following the CoS' signature, forward the "Welcome Aboard" letter, the Sponsor's Information Sheet, enclosure (2) and a "Welcome Aboard" package. The "Welcome Aboard" package is obtained from Naval Medical Center Portsmouth's Fleet and Family Support Center.

(3) Prepare a Sponsor's Appointing Letter enclosure (3) for the CoS' signature. After receiving the signature, forward

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the letter to the assigned sponsor. The CoS Secretary or the Admin LCPO will forward the letter and "Welcome Aboard" package to the incoming member.

(4) The Admin LCPO will ensure that all new check-ins receive two command name tags upon arrival.

(5) The CoS Secretary will ensure completion of the Sponsor Program Questionnaire enclosure (4) by the incoming member upon their arrival at the command. The completed questionnaire will be reviewed by the Command Sponsor Program Coordinator and will be maintained in the member's personal folder.

(6) The assigned Command Sponsor Program Coordinator will evaluate the Sponsor Program and recommend changes and improvements as necessary.

b. The individually appointed sponsors are responsible for contacting the incoming member with information about the command, the geographical area, and with all check-in and orientation procedures. The sponsor will also inform their respective DCoS when the new check-in has a confirmed arrival date.



PETER F. O'CONNOR
Chief of Staff

Distribution: (NAVMEDEASTINST 5215.1)

1700
Ser 09/07xxxx
X xxx 08

CDR XXXXXXXXXXXXX
(Address of Member)

Dear CDR XXXXXXXX:

Welcome aboard and congratulations on your orders to the Navy Medicine East, Portsmouth, Virginia. As your Chief of Staff, I can assure you that we are looking forward to your joining our fine team of professionals.

Navy Medicine East is located in Building 3 on the 13th, 14th and 15th floors, on the Naval Medical Center, Portsmouth compound. Our primary mission is to provide technical assistance and support to all activities within our Area of Responsibility (AoR). Our AOR includes Naval Hospitals and Naval Health Clinics in Jacksonville, Pensacola, Beaufort, Charleston, Camp Lejeune, Cherry Point, New England, Great Lakes, Corpus Christi, Rota, Naples, Sigonella and Guantanamo Bay. This command is very proud of its caring, customer-focused atmosphere with its primary emphasis on service.

You might have some questions or concerns about your new duty station. To help answer any questions, your sponsor, CDR XXXX XXXXX, (DSN) 377-XXXX, (757) 953-XXXX, or at XXXXX.XXXXXX@med.navy.mil. If you wish to write, the address is Navy Medicine East, 620 John Paul Jones Circle, Suite 1400, Portsmouth, VA 23708-2106.

Additionally, a "Welcome Aboard" package containing applicable telephone numbers and general information about the Norfolk area is enclosed. Take a minute to log onto our Navy Medicine East Website at <http://nme.mar.med.navy.mil>. If you have a family member in the Exceptional Family Member Program, and require assistance, contacting your sponsor as soon as possible will be most beneficial. Please complete and return the Sponsor's Information Sheet.

I am eagerly looking forward to your arrival. I feel confident you will find your new assignment to be challenging and rewarding. If I may be of assistance to you in any way, please do not hesitate to contact me personally at (DSN) 377-0422 or (757)953-0422. **Welcome aboard.**

Sincerely,

PETER F. O'CONNOR
Chief of Staff

Enclosure (1)

SPONSOR'S INFORMATION SHEET

PRIVACY ACT STATEMENT: The completion of this form is not mandatory; however, such information will be helpful to the command. Please complete the information below and mail to: Navy Medicine East, Administrative Support Department, 620 John Paul Jones Circle, Portsmouth, VA 23708-2106.

Name:		Rank:	
Marital status:		Will dependents accompany you?	
Spouse's name:			
Dependent children's names:		Age:	Male/Female:
If spouse is on active duty, please provide rank and duty station:			
Your present home address:			
DSN work phone number:	COM work phone number:	Home phone number:	
Date detaching present command:	Dates you plan to take leave:	Date you expect to report to the NME:	
Leave address and phone number:			
Other information:			

1740
Ser M1A/
(Date)

From: Chief of Staff, Navy Medicine East
To: LTJG I. M. ASAILOR, MSC, USN

Subj: SPONSOR'S APPOINTING LETTER

Encl: (1) Sponsor Checklist

1. You have been selected as the sponsor for ENS I. M. New.
2. Please provide the incoming member with information concerning Navy Medicine East. Being a sponsor is nothing more than being a friend. How well you carry out your responsibilities can make a lasting impression upon the arriving member, the family, and the overall morale at this command. Your role as a sponsor carries with it the obligation to attempt to contact the incoming member, provide the necessary and appropriate information, and to assist the member during the check-in procedures.
3. ENS I. M. New has been advised to correspond with you. You should receive a "Sponsor's Information Sheet" in return, containing personal information about the member's transfer and any other assistance required or desired. However, failure to receive this information DOES NOT release you from your responsibilities as a sponsor.
4. Telephone or write to the incoming member as soon as possible, providing the member with general information about the command. Provide the member with your address and telephone number and offer to answer any questions the member may have.
5. As the sponsor, you are responsible for assisting the incoming member throughout all check-in procedures. If any difficulties arise in fulfilling these responsibilities, please notify me as soon as possible. Remember: You are the initial point of contact at this command for the incoming member. The first impression is often a lasting one; help make it a positive one!

PETER F. O'CONNOR
Chief of Staff

Enclosure (3)

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SPONSOR PROGRAM QUESTIONNAIRE

Your help is requested in evaluating the effectiveness of our Sponsor Program. We ask that you complete this questionnaire based on your experiences on your recent PCS transfer. **Upon completion, please return questionnaire to the DCOS for Human Resources**

Name: _____ Rank/Rate: _____

Question		Yes	No	N/A	
Were you assigned a sponsor before arriving?					
Did your sponsor assist you in the following?					
• Meet you upon arrival?					
• Arrange for any temporary housing/transportation needs?					
• Write to you before you arrived in the area?					
• Were your questions answered in a timely and accurate manner?					
• Assist you in other areas to get settled?					
Question	Letter only	Packet of Information only		Both	Neither
What information did you receive from your sponsor and this command prior to arriving?					
Question	1	2	3	4	5
Overall, how would you rate the helpfulness of your sponsor? (Rate from 1 (very poor) to 5 (excellent)).					
Comments:					

Thank you for taking the time to complete this questionnaire. If you have suggestions for improvements to our sponsor program, just jot them on the back of this sheet.