

**TRANSFERS CHECK-OFF SHEET**

RANK/RATE:	NAME: (Last, First, MI)	SSN:	ORDER NUMBER:
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TRANSFER DATE:	TRANSFERRED TO:
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DATE	INIT	ACTION
_____	_____	Transfer Directive/Orders received and supplementary items on orders verified; supplementary items on EPAD transcribed using ENLTRANSMAN Chapter 24
_____	_____	Transfer Information Sheet and required enclosures forwarded to member (MUST BE COMPLETED WITHIN TEN DAYS OF RECEIPT OF ORDERS/TRANSFER DIRECTIVE)
		<input type="checkbox"/> Copy of orders or EPAD with transcribed supplementary items <input type="checkbox"/> Navy Sponsor Notification, NAVPERS 1330/2 <input type="checkbox"/> PCS Travel, NAVPERS 7041/1 <input type="checkbox"/> Advance Pay Certification/Authorization, PSAFE Form 7220/25 <input type="checkbox"/> Request for Advance Payment of Dislocation Allowance (DLA) and/or Dependent Travel Allowance, PSAFE Form 7220/10 <input type="checkbox"/> Passenger Reservation Request - PCS TRAVEL, PSAFE 4650/5 <input type="checkbox"/> Application for Transportation of Dependents, PSAFE Form 4650/9 <input type="checkbox"/> Overseas Screening, NAVPERS 1300/16
_____	_____	Transfer Information Sheet received from member with required documents
_____	_____	Overseas Screening completed, if required (DTG/Date: _____)
_____	_____	Special Duty Screening completed, if required (Date: _____)
_____	_____	Family Member Entry Approval requested, if required (DTG: _____)
_____	_____	_____ Family Member Entry Approval received (DTG: _____)
_____	_____	Passenger Reservation Request (PRR) forwarded to NAVPTO
_____	_____	_____ Flight Itinerary received
_____	_____	Member/Command notified of flight date
_____	_____	<b>No-Fee Passport/Official Passport/Visa application completed, if applicable</b>
_____	_____	Completed Obligated Service requirement, as needed (OBLISERV required up to: August-01 )
_____	_____	Orders/Endorsement Completed
_____	_____	Advance Pay request forwarded to DK
_____	_____	Departure TLA Briefing provided to member
_____	_____	_____ TLA request processed
_____	_____	PACKAGE RECEIVED BY: _____
_____	_____	DATE: _____
_____	_____	Page 2 verified and updated
_____	_____	Print Page 4 and file in service record
_____	_____	Page 5 verified and updated
_____	_____	SHO3 and Loss event completed
_____	_____	Required Page 13 entries completed:
		<input type="checkbox"/> Overseas Screening <input type="checkbox"/> Overseas Tour Election <input type="checkbox"/> Screening completion _____ <input type="checkbox"/> Urinalysis
_____	_____	Advance DLA/Travel Allowance request forwarded to Fiscal, if applicable
_____	_____	Collect the following documents from the member
		<input type="checkbox"/> Meal Pass (if applicable) <input type="checkbox"/> Certificate of Personnel Security Investigation (OPNAV 5520/20) <input type="checkbox"/> Transfer Evaluation/Fitness Report, if applicable
_____	_____	Wrap service record and give to member

NOTE: PORTCALLS, FAMILY MEMBER ENTRY APPROVAL, AND NO-FEE PASSPORTS MUST BE PROCESSED WITHIN THREE WORKING DAYS OR RECEIPT OF SUPPORTING DOCUMENTS

- RETAIN FILE:
- Original Transfer Check-Off Sheet
  - PSD Check-Out Card
  - Original Transfer Information Sheet
  - Copy of Original Orders and modifications with all endorsements
  - Copy of SHO3 and L01/L20
  - Copy of Port Call
  - Copy of all screening documents
  - Copy of Transfer Directive (EPAD, MSG, etc.)