

**PRIVACY ACT STATEMENT**

The authority to request this information is contained in 5 USC 301, Departmental Regulations. The principal purpose of the information is to enable you to make known your desire for one of the four items listed or for some other special consideration or authorization. The information will be used to assist officials and employees of the U.S. Coast Guard in determining your eligibility for and approving or disapproving the special consideration or authorization being requested. Completion of the form is mandatory; failure to provide required information may result in delay in response to or disapproval of your request.

<b>NAME</b> <i>(Last, first, middle initial)</i>		<b>RATE</b>	<b>EMPID</b>
<b>SHIP OR STATION</b>			<b>DATE OF REQUEST</b>
<b>DEPARTMENT / DIVISION / WARD</b>		<b>DUTY SECTION / GROUP</b>	
<b>NATURE OF REQUEST</b>			
<input type="checkbox"/> LEAVE <input type="checkbox"/> SPECIAL LIBERTY <input type="checkbox"/> SPECIAL PAY <input type="checkbox"/> COMMUTED RATIONS <input type="checkbox"/> OTHER <i>(Below)</i>			
<b>NO. DAYS REQUEST</b>	<b>FROM</b> <i>(Date and time)</i>	<b>TO</b> <i>(Date and time)</i>	
<b>DISTANCE</b> <i>(Miles)</i>	<b>MODE OF TRAVEL</b>		
	<input type="checkbox"/> AIR <input type="checkbox"/> TRAIN <input type="checkbox"/> BUS <input type="checkbox"/> CAR		
<b>LEAVE ADDRESS</b> <i>(Street, box or route no., City, State, Zip Code)</i>			<b>TELEPHONE NUMBER</b>

**REASON FOR REQUEST**

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**SIGNATURE OF APPLICANT:**

**I AM ELIGIBLE AND OBLIGATE MYSELF TO PERFORM ALL DUTIES OF PERSON MAKING APPLICATION -**

<b>SIGNATURE OF STANDBY</b>	<b>DUTY STATION</b>
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**PERSONNEL OFFICE**

<b>EARNED LEAVE</b>	<b>LEAVE THIS FISCAL YEAR</b>	<b>DATE LAST PAID</b>
<b>DAYS AS OF:</b>		
<b>RECOMMENDED APPROVAL</b>		<b>SIGNATURE AND RANK/RATE / TITLE / DATE</b>
<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED		

**REASON FOR DISAPPROVAL**

**LOG OUT AND IN WITH OOD** *(When required)*

<b>OUT</b> <i>(Hour and date)</i>	<b>INITIALS OOD</b>	<b>IN</b> <i>(Hour and date)</i>	<b>INITIALS OOD</b>
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**HITCHHIKING IS PROHIBITED**