

SEPARATIONS DATASHEET

Date received by Marine: _____ Date received by IPAC: _____

MARINE INFORMATION

Rank: _____ Name: _____ SSN: _____
(Last, First and Middle Initial)

Unit: _____ Work Phone#: _____

Permanent Mailing Address: (Your DD Form 214 will be sent to this address)

Street City State Zip

Nearest Relative Name: _____ Relationship: _____

Nearest Relative Address:

Street City State Zip

TRAVEL INFORMATION

Travel Election: POV or GTR Advance Travel: YES or NO

LEAVE INFORMATION

Terminal Leave: YES or NO Number of Days: _____

Starting Date: 1201 _____ Ending Date: 2359 _____

Leave Address:

Street City State Zip

Leave Address Phone #: _____

Request to Sell Back Annual/Accrued Leave: YES or NO

Number of Days Requested: _____

RETIRING AND MEDICAL OR INVOLUNTARY SEPARATING MARINES ONLY

Permissive TAD: YES or NO Number of Days Requested: _____

Starting Date: _____ Ending Date: _____

Read and initial the following:

_____ 1. The following documents are required in order to initiate the separations process:

- a. Separation Data Sheet
- b. Copy of Career Planning Contact Record (NAVMC 10213)

_____ 2. The following documents must be submitted to IPAC prior to departure:

- a. Health records (Medical & Dental)
- b. Check Out Sheet
- c. Meal Card/Lost or Stolen Meal Card Statement (If applicable)
- d. Identification Card/Lost or Stolen Identification Card Statement (No terminal leave)

_____ 3. Terminal leave up to 90 days will be approved by the Commanding Officer. Terminal leave in excess of 90 days must be requested and approved from CMC.

_____ 4. In Accordance with the MCO P1050.3, Leave, Liberty, and Administrative Absence Manual, and MCO P1900.16, Separations Manual, terminal leave is a privilege, not a right.

_____ 5. Permissive Temporary Additional Duty (PTAD) for house hunting is only authorized for Marines who are retiring and medically or involuntary separating.

_____ 6. Single Marines on terminal leave will receive base pay, Basic Allowance for Housing (BAH) at the Own Right rate, and Separation Rations until their Expiration of Active Service (EAS). Married Marines will continue to receive the same entitlements.

_____ 7. Marines who elect to sell back leave will receive a day's base pay for every day sold back minus taxes.

_____ 8. Travel entitlements will be paid the shorter distance from Twentynine Palms, CA to the Marine's home of record or address the Marine intends establishing a permanent residence.

_____ 9. Travel entitlements will be liquidated 10 working days after the Disbursing Office receives the Travel Voucher or Subvoucher (DD Form 1351-2).

_____ 10. Maintaining the direct deposit account with my financial institution 45 days after my EAS will facilitate the credit of entitlements.

_____ 11. Traffic Management Office (TMO) and Disbursing appointments will be scheduled by you, after receiving your Travel/Pay Certificate (NAVMC 11060).

_____ 12. Report to the Installation Personnel Administration Center (IPAC), Orders Management Branch (OMB) on the date of departure at 1600 on weekdays and 0730 on weekends.

_____ 13. Notify IPAC, OMB immediately, if there are any changes to the information provided. Failure to comply with these instructions may result in improper credit of entitlements.

SNM Signature: _____ Date:

COMMAND ENDORSEMENT

1. SNM is approved for departure on this date _____.
2. The following are the administrative requirements:
 - a. Submit Administrative Remarks NAVMC 118 (11) to IPAC
-Assignment of Reenlistment Code (RE) Code 1B, 1C, 3_, & 4_
 - b. Submit of Reenlistment Lateral Move Request (RELM) (If applicable) to IPAC
-Separation Pay
 - c. Complete Pre-separation Counseling Checklist (DD Form 2648)
 - d. Attend Pre-separation Counseling
 - e. Attend Transition Assistance Program (TAP)
 - f. Complete a separation physical
 - g. Submit Health Records (Medical & Dental) to IPAC
 - h. Submit complete Check Out Sheet to IPAC
 - i. Submit Meal Card or Lost/Stolen Meal Card Statement (If applicable) to IPAC
 - j. Submit Identification Card or Lost /Stolen ID Card Statement (No terminal leave) to IPAC

Company 1stSgt: _____ Date: _____
(Print & sign)

Company CO: _____ Date: _____
(Print & sign)

Battalion CO: _____ Date: _____
(Print & sign)

Battalion SgtMaj: _____ Date: _____
(Print & sign)