Commander, U.S. 7th Fleet, Family Information Sheet

Dear C7F Families,

To enable me as your Ombudsman to contact you regarding official matters or in case of an emergency, please provide the information that is requested below. Your personal information will not be used by anyone other than the Ombudsman. In order to receive information by the fastest means possible please provide me with your email address. In addition this will enable you to receive and review the C7F Ombudsman newsletter and other updates as they arise.

Please fill in your information, and mail to:
C7F Ombudsman, PSC 473 BOX 290, FPO-AP 96349.

Sponsor's Name:_____ Rate/Rank:_____

Sponsor's SS#: (last 4)_____ Date of Birth:_____ Dept/Div:_____ PRD:_____

Spouse's Name:_____

Phone – Home:_____ Work:_____ Cell:_____

Mailing Address:_____

Physical Address:_____

E-mail:_____

Additional Family members/loved ones e-mail and or mailing addresses whom you wish to receive communication (e.g. Newsletters)

_____

_____

Children: Names Date of Birth Name of School Grade

_____

_____

_____

_____

Other Dependents:_____

Local Emergency Contacts: (Outside of immediate family members)

Name:_____Home Phone:_____ Cell Phone:_____

Primary Next of Kin: (Other than those living in your home)

Name:_____Relationship:_____Phone Number:_____

Address:_____

Secondary Next of Kin:

Name:_____Relationship:_____Phone Number:_____

Address:_____

Family Questionnaire/Support Survey:

NAME: _____ CONTACT TELEPHONE: _____

May we have your permission to include your name on the Telephone Tree? Yes No

Are you interested in being a Key Caller for the Telephone Tree? Yes No

Is English your primary language? Yes No
(If NO, please state _____)

Are you willing and able to translate English into Japanese Yes No

How long has your family been attached to Commander Seventh Fleet _____ months

Would you say that your welcome to Japan was satisfactory? ____Yes ____No ____ Partially

What do you feel is lacking in terms of family support?

_____

_____

_____

What do you feel an official Family Support Group (FSG) could accomplish?

_____

_____

_____

Do you feel that an official Family Support Group is warranted? ____Yes ____No

What form of FSG would you feel is most appropriate for Commander Seventh Fleet?

____ Informal (No President or Board, just interested family members organizing things as they come up)

____ Formal (Elected President and board, official by-laws, dues, and regular meetings)

Would you be interested in taking a leadership role (President or Board Member) in an official FSG?

____Yes ____No

Would you attend regular meetings of an official FSG?

Monthly? ____Yes ____No ____Sometimes

Quarterly? ____Yes ____No ____Sometimes

Only during deployment ____Yes ____No ____Sometimes

Do you have an up to date FAST FILE registered at the FAST Office? Yes No

Are you interested in assisting new comers through the Sponsorship Program? Yes No

(Please include any additional details on the reverse of this form)