

NEO CENSUS INPUT FORM

PRIVACY ACT STATEMENT:

Authority : 10 U.S. code 133

Purpose: Used by command to determine noncombatant evacuation requirements (NEO), regulatory compliance, base infrastructure needs, safety, and

DoDDs requirements.

Routine use: Used by appropriate authority to evaluate base facilities requirements.

Disclosure: Failure to complete this form or falsification of information may result in administrative and/or disciplinary action.

SPONSOR INFORMATION:

1. SSN (000-00-0000)	2. Rank/Grade	3. Name (Last, First, Middle)	4. Date of Birth (mm/dd/yyyy)	5. Dual Military? Yes No
6. Command		7. (circle one) AFLOAT ASHORE	8 Do you reside... (circle one) OFFBASE ONBASE	9. Service (circle one) N M A AF C
10. PRD (mm/dd/yyyy)	11. EAOS (mm/dd/yyyy)	12. Quarters Address		13. Home phone #

14. PERSONS RESIDING IN HOUSEHOLD:

Name (Last, First, Middle)	SSN (000-00-0000)	Date of Birth (mm/dd/yyyy)	Relationship W, s, d, m, f, etc	Passport Number	Passport Country	Passport Exp. Date	DFAS Approved	Sponsored CMD
							Y N	Y N
							Y N	Y N
							Y N	Y N
							Y N	Y N
							Y N	Y N

15. Vehicle:

License plate#	Make

16. Pets:

# of Dog	# of Cat

I understand that I am required to report any changes to the information contained in this census within FIVE days to my Commander/Commanding Officer through NEO Coordinator. I also understand that any misrepresentation in completing this form or failure to comply with this order may constitute a violation of Article 90 of the Uniform Code of Military Justice and may subject me to disciplinary action.

Signature _____ Date _____