

DEPARTMENT OF THE AIR FORCE 377 AIR BASE WING (AFGSC)

KIRTLAND AFB CHAPLAIN CORPS EVENT REQUEST FORM

377 ABW/HC 1950 2ND STREET, SE KIRLTAND AFB, NM 87117 PHONE: 505.853.5000 DSN: 263.5000



AUTHORITY: 10 USC 8013. PRINCIPLE PURPOSE: ROUTINE USES: None. DISCLOSURE IS VOLUNTA		s used to systematically sched			
POC NAME/ORGANIZATION:		POC PHONE NUMBER (DSN AND CELL):		TODAY'S DATE:	
TYPE OF EVENT:		NAME OF EVENT:		LOCATION OF EVENT:	
DATE/TIME OF EVENT (START TO FINISH):	SELEC	SELECT UNIFORM OF OFFICIAL PARTY WHICH APPL		IES: IS THIS EVENT:	
	N	MESS DRESS SERVICE DRESS		THER	INDOOR
	0	OCP CIVILIAN ATTIRE			OUTDOOR
IS THE CHAPLAIN'S SPOUSE INVITED	RIATE)?	IS A MEAL FOR THE CHAPLAIN PROVIDED?			
YES			YES		
NO			NO		
IF REQUESTING A SPECIFIC CHAPLAIR	N, FAITH G	ROUP, OR RELIGOUIS	AFFAIRS AIRMAN, PLEA	ASE LIST THEM	BELOW (PLEASE EXPLAIN):
WILL THERE BE ANY DISTINGUISHED	VISITORS	PRESENT? IF SO, PLEAS	SE LIST BELOW:		
ADDITIONAL NOTES OR COMMENTS:				SIGNAT	TURE OF REQUESTOR:
For Chapel Use Only:					
REMARKS:					
Coordinated By:			Date:		
Staff Providing Invocation:	Date Received:			Date Confi	rmed:

KIRTLAND CHAPEL FORM 1 - 20240215

