



TRANSITION ASSISTANCE INITIAL SELF-ASSESSMENT WORKSHEET AND STATEMENT OF UNDERSTANDING



SECTION A. SERVICE MEMBER INFORMATION

NAME: _____ DOD ID: _____ INSTALLATION: _____

WORK EMAIL: _____ PERSONAL EMAIL: _____

DATE OF SEPARATION: _____ WORK PHONE: _____ CELL PHONE: _____

HOW MANY YEARS OF SERVICE: _____ DOB: _____ AGE: _____ GENDER: _____

SECTION B. DEMOGRAPHICS

Rank: _____ Unit: _____

Service Branch: USN USAF USA USMC USCG USSF Service Component: Reserve Guard

Rate/Designator/MOS/AFSC: _____

Marital Status: Single Married Widowed Divorced Separated Children# _____

Highest Level of Education: GED/HS Associates Bachelors Masters Post-Graduate Doctorate

Concentration: _____

SECTION C. DISCHARGE

Retiring 20+ Years	<input type="radio"/> Yes	<input type="radio"/> No
Medical Retirement	<input type="radio"/> Yes	<input type="radio"/> No
Medical Separation	<input type="radio"/> Yes	<input type="radio"/> No
Voluntary Separation	<input type="radio"/> Yes	<input type="radio"/> No
Involuntary Separation	<input type="radio"/> Yes	<input type="radio"/> No
Administrative Separation	<input type="radio"/> Yes	<input type="radio"/> No
Demobilization	<input type="radio"/> Yes	<input type="radio"/> No

SECTION D. PROJECTED CHARACTERIZATION OF DISCHARGE

Honorable	<input type="radio"/> Yes	<input type="radio"/> No
Honorable Conditions (General)	<input type="radio"/> Yes	<input type="radio"/> No
Other than Honorable	<input type="radio"/> Yes	<input type="radio"/> No
Bad Conduct	<input type="radio"/> Yes	<input type="radio"/> No
Dishonorable	<input type="radio"/> Yes	<input type="radio"/> No
Dismissed	<input type="radio"/> Yes	<input type="radio"/> No
Uncharacterized	<input type="radio"/> Yes	<input type="radio"/> No
Unknown	<input type="radio"/> Yes	<input type="radio"/> No

SECTION E. PERSONAL READINESS INVENTORY

Instructions: Based on the past week, please rate how well things are going in each area below using a 0-10 scale, with 10 being the best possible rating. If an area does not concern you, please mark it a 10.

1. OVERALL ADJUSTMENT TO MILITARY LIFE (Understand & support the military lifestyle & mission requirements, etc....)
2. RELOCATION/MOVING (Ability to move when required)
3. ADJUSTMENT TO COMMUNITY (Ability to find on/off-base information, services, events & activities, etc....)
4. DEPLOYMENT READINESS (Ability to support short-notice deployments, awareness of available support for loved ones, etc....)
5. EMPLOYMENT (Job search techniques & skills, ability to secure suitable employment, etc....)
6. FINANCIAL READINESS (Basic needs & financial obligations met, savings, investments & retirement, etc....)
7. MILITARY/WORK ENVIRONMENT (Work environment/relationships OPSTEMPO/pace of work)
8. PERSONAL RELATIONSHIPS (Family, Friends, & loved ones etc....)
9. RETENTION (Intention to continue military career past current commitment)
10. TRANSITION TO CIVILIAN LIFE (Prepared for separation/retirement, aware of benefits & entitlements, etc.)

SECTION F. PERSONAL GOALS

What are your post-separation short-term goals?

What are your post-separation long-term goals?

SECTION G. FACTORS

FAMILY LIFE AND RELOCATION PLAN:

- 1. Do you plan to relocate after leaving the military? Yes No Unsure
If Yes, where? _____
- 2. Is cost of living higher where you plan to relocate? Yes No Unsure
- 3. Do you anticipate having a support system in place? Yes No Some
e.g., Family, Friends, Mentor, Transportation, Housing
- 4. Does the thought of leaving the military create stress on you or your family? Yes No
- 5. Are you comfortable with the decision to transition? Yes No Some
- 6. Are you interested in TAP assistance? Yes No Some

FINANCIAL PLAN:

- 1. Have you initiated projected post transition budget? Yes No N/A
- 2. Are you planning for your retirement? (e.g. TSP, 401K) Yes No N/A
- 3. Have you established a financial emergency plan? Yes No N/A
- 4. Do you have adequate cash set aside in case of emergencies? Yes No N/A
- 5. Have you considered additional expenses? (childcare or child support, commuting, etc.) Yes No N/A
- 6. Have you calculated the impact of renting vs. buying during your transition period? Yes No N/A
- 7. Have you examined your tax status with regard to taxable income? Yes No N/A
- 8. Have you reviewed your vehicle(s) payment, insurance, registration and taxes? Yes No N/A
- 9. Have you assessed your insurance needs? (medical, exceptional family member, dental, life) Yes No N/A
- 10. Have you reviewed your credit report in the last 4 months? Yes No N/A
- 11. Do you have an up-to-date will and/or power of attorney? Yes No N/A
- 12. Do you have adequate funds to support your lifestyle post? Yes No Some

SECTION H. TRACKS

EMPLOYMENT PLAN

- 1. Do you plan to work after leaving the military? Yes No
- 2. Are you currently applying for employment? Yes No
- 3. Do you have a confirmed job offer? Yes No
- 4. Do you have an updated resume? Yes No
- 5. Do you plan on staying in your current career field? Yes No Somewhat
- 6. Are you seeking a high demand career field? Yes No Somewhat
- 7. Would you like more information on employment? Yes No
- 8. Do you have a disability that may impact your pursuit of job or school? Yes No Pending

EDUCATION PLAN

- 1. Do you plan to enroll in continuing education or do you have enrollment confirmation? Yes No
- 2. Are you currently applying to schools? Yes No
- 3. Do you have a professional license(s)/certificate(s)? Yes No
- 4. Would you like more information on education? Yes No

ENTREPRENEURSHIP PLAN

- 1. Do you currently own a business? Yes No
- 2. Do you intend to start your own business after leaving the military? Yes No
- 3. Do you have a business plan? Yes No
- 4. Would you like more information on entrepreneurship? Yes No

VOCATIONAL PLAN

- 1. Have you attended a trade school? Yes No
- 2. Are you enrolled in or plan to enroll in an apprenticeship program? Yes No
- 3. Do you have a technical or trade license(s)/certification(s)? Yes No
- 4. Would you like more information on trades? Yes No

TRACK SELECTION

- 1. Are you interested in attending and additional 2-day track for additional information? Yes No
- 2. If Yes, please select one or more option below:

Employment Vocational Education Entrepreneurship

SECTION I. SERVICE DELIVERY STATEMENT OF UNDERSTANDING

You can expect the M&FRC staff to respect your right to privacy. You should know, however, that M&FRC staff members do not have complete privileged communication. If your supervisor/commander/first sergeant made the appointment for you to come to the M&FRC, we will provide general feedback to that person, but will not ordinarily go into specific detail about your situation. The squadron commander will be notified of situations which may directly impact personal health, safety, or mission accomplishment. As in civilian life, M&FRC staff members are required by law, with or without your consent, to contact proper authorities: (1) If they believe you intend harm to yourself or others, (2) If family member maltreatment, molestation, child neglect, or drug use is suspected.

You will be asked to provide demographic information, which is electronically stored (and secured). The record contains demographic information, a brief description of your visit(s), and your service plan. Records are maintained for the sole purpose of assisting you the customer.

//Signed//

Ann Mancillas

Flight Chief, Military & Family Readiness Center, Kadena AB, Japan

Customer Signature	Date
M&FRC Staff Member Signature	Date

SECTION J. APPOINTMENT SCHEDULING



Please email your completed form to: 718FSS.kadena.tapteam@us.af.mil.
A TAP Counselor will contact you to schedule your Initial Counseling appointment.
If you have questions or concerns, please call the Military & Family Readiness Center at DSN 315-634-3366 or Commercial +81 98-961-3366.

