

SEYMOUR JOHNSON AIR FORCE BASE MILITARY FUNERAL HONORS REQUEST

Email: 4fw.hg.hg@us.af.mil
DSN 722-7019

Phone: (919) 722-7019
(<https://www.sjfs.com/honor-guard/>)

INSTRUCTIONS:

Fill out form entirely. **Email completed request sheet to address above, upon submission Call Honor Guard to confirm receipt of request.** Honor Guard will make every effort to notify the requestor by phone regarding cancellation or modification. If there are any questions notify Manager or NCOIC of Base Honor Guard Program. **-ATTACH DISCHARGE/ RETIREMENT PAPERS/ PROOF OF MILITARY SERVICE (i.e. DD214, DD256, ID Card, Retirement Certificate, etc...)**

A. DECEASED INFORMATION

1. SSN:	2. NAME OF DECEASED: (Last Name, First Name, MI, Suffix)	FELONY CONVICTION? <input type="checkbox"/> NO <input type="checkbox"/> YES - call HG	
3. ADDRESS (widow/widower/NOK):		4. ADDRESS(2):	
5. CITY:		6. STATE:	7. ZIP:
8. PARENT SERVICE COMPONENT (AF/ARMY/USMC/NAVY/USCG):		9. GRADE/RANK:	
10. DUTY STATUS: <input type="checkbox"/> ACTIVE DUTY <input type="checkbox"/> RETIRED <input type="checkbox"/> VETERAN			

B. COORDINATORS INFORMATION

11. REQUEST SUBMISSION DATE:	12. REFERRER (Funeral Home/Family Member/Casualty Assistance Officer):	13. PHONE:	
14. TYPE OF SERVICE: <input type="checkbox"/> INTERMENT <input type="checkbox"/> VAULT LID <input type="checkbox"/> CHAPEL <input type="checkbox"/> BURIAL AT SEA <input type="checkbox"/> MEMORIAL <input type="checkbox"/> ENTOMBMENT		15. REMAINS: <input type="checkbox"/> CASKET <input type="checkbox"/> CREMATED _____ WEIGHT EST.	16. Will there be any other Honor Guard there (i.e. VFW, F.D., Police)? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, whom?
17. Honors Requested: <input checked="" type="checkbox"/> Flag Fold & Presentation <input checked="" type="checkbox"/> Taps <input type="checkbox"/> Firing Party <input type="checkbox"/> Pall Bearers <input type="checkbox"/> Chaplain (E-9 / O-6 & above) NOTE: Veteran: pre-selected options only Retiree: flag fold, presentation, taps, firing party and pall bearers			

SPECIAL REQUESTS/

COMMENTS:

C. NEXT OF KIN INFORMATION

18. NAME OF NEXT OF KIN:	19. RELATIONSHIP:	20. PHONE NUMBER:	
D. LOCATION TO PERFORM HONORS			
21. CEMETERY: <input type="checkbox"/> National <input type="checkbox"/> Private <input type="checkbox"/> State <input type="checkbox"/> Base/Post <input type="checkbox"/> Chapel <input type="checkbox"/> Funeral Home <input type="checkbox"/> Other			
22. NAME:			23. STATE:
24. ADDRESS(1):		25. ADDRESS(2):	
26. CITY:		27. ZIP:	
28. COUNTY (REQUIRED):	29. PHONE:	30. WEBSITE:	

E. POINT OF CONTACT INFORMATION

31. POC THE DAY OF SERVICE (Last Name, First Name):	32. POC PHONE:	33. POC CELL:
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F. SCHEDULING INFORMATION

34. DATE OF HONORS:	35. APPROXIMATE MILITARY FUNERAL HONOR'S STARTING TIME:
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NOTES:

- Honor guard will arrive at location one hour prior to providing honors.
- If no physical address, please attach directions from SEYMOUR JOHNSON AFB 27531.
- Veteran Honors (**DODI 1300.15, Military Funeral Support, Title 10, Section 1491 requirement**) consist of 2-3 honor guardsmen performing a flag fold, playing of TAPS, and flag presentation to the next of kin.
- Retiree Honors (medical or +20 years of service), **if manning permits**, consist of 3-7 honor guardsmen pall bearing (to final resting place), flag fold, firing party, TAPS, and flag presentation to the next of kin. **Honor Guard will notify the service coordinator no later than 24-hours prior to confirm requested entitlement support (i.e.) pall bears/firing party.**

REVIEWED BY: _____ DATE: _____ INTERNAL USE ONLY INITIALS: _____