

## DEPLOYMENT CYCLE SUPPORT (DCS) CHECKLIST

For use of this form, see Army Directive 2007-02; the proponent agency is DCS, G-1.

### DATA REQUIRED BY THE PRIVACY ACT OF 1974

**AUTHORITY:** 10 USC Section 3013, Secretary of the Army; Department of the Army Deployment Cycle Support (DCS) Directive; and EO 9397 (SSN).

**PURPOSE:** To provide a standardized means to evaluate readiness posture and validate military and non-military personnel for deployment.

**ROUTINE USES:** The "Blanket Routine Uses" set forth at the beginning of the Army compilation of systems of records notice apply.

**DISCLOSURE:** Voluntary. However, failure to update and confirm information is correct may impede processing time and deployability status.

**The Deployment Cycle Support Checklist is filed in the Deployment Packet to complete the action.  
A copy remains at the losing organization.**

1. DATE (YYYYMMDD)		2. NAME (Last, First, Middle)			3. SSN	
4. SERVICE AFFILIATION <input type="checkbox"/> USA <input type="checkbox"/> USMC <input type="checkbox"/> NOAA <input type="checkbox"/> USN <input type="checkbox"/> USCG <input type="checkbox"/> USAF <input type="checkbox"/> PHS		5. COMPONENT <input type="checkbox"/> ACTIVE <input type="checkbox"/> NON-MILITARY <input type="checkbox"/> GUARD <input type="checkbox"/> RESERVE		6. STATUS <input type="checkbox"/> TPU <input type="checkbox"/> AGR <input type="checkbox"/> NG32 <input type="checkbox"/> IRR <input type="checkbox"/> RET <input type="checkbox"/> IMA <input type="checkbox"/> NG10		7. PAY PLAN/GRADE
9. NON-MILITARY STATUS <input type="checkbox"/> DOD <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> OTHER (Specify) <input type="checkbox"/> DAC <input type="checkbox"/> RED CROSS		10. TRAVEL STATUS a. UNIT ORDER b. INDIVIDUAL		11. DATE OF BIRTH (YYYYMMDD)		
12. ARMY COMMANDS		13. DATE ARRIVED IN THEATER (YYYYMMDD)		14. CITIZENSHIP COUNTRY		
15. REDEPLOYMENT DATE (YYYYMMDD)		16. REFRAD DATE (YYYYMMDD)		17. DEPLOYMENT COUNTRY		
18. PARENT UIC		19. DUIC		20. UNIT DSN PHONE NUMBER		21. CONUS REPLACEMENT CENTER

**22. STATUS OF EACH DCS STAGE and COMMANDER'S VALIDATION MEMO (C= Completed; NC = Not Completed)**

a. TRAIN-UP/PREP <input type="checkbox"/> C <input type="checkbox"/> NC	b. MOBILIZATION <input type="checkbox"/> C <input type="checkbox"/> NC	c. DEPLOYMENT <input type="checkbox"/> C <input type="checkbox"/> NC	d. EMPLOYMENT <input type="checkbox"/> C <input type="checkbox"/> NC	e. REDEPLOYMENT <input type="checkbox"/> C <input type="checkbox"/> NC
f. POST-DEPLOYMENT <input type="checkbox"/> C <input type="checkbox"/> NC	g. RECONSTITUTION <input type="checkbox"/> C <input type="checkbox"/> NC	h. CDR VALIDATION MEMO <input type="checkbox"/> C <input type="checkbox"/> NC		

**SECTION I - DCS VALIDATION**

**Part A - Accuracy Statement:** I understand I am certified for reconstitution and, to the best of my knowledge, all information contained in this document is correct and current.

1. SIGNATURE OF INDIVIDUAL		2. RANK		3. TITLE	
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**Part B - First Line Leader/Immediate Supervisor's Authentication** I have authenticated the information contained in this checklist as correct and current.

4. PRINTED NAME (Supervisor)		5. RANK		6. TITLE		7. SIGNATURE	
8. DATE (YYYYMMDD)		9. UNIT		10. ADDRESS			
11. PHONE NUMBER		12. E-MAIL ADDRESS			13. DSN		14. FAX PHONE NUMBER

**Part C - Commander's Acknowledgment:** (Commanders may approve an individual for reconstitution based on the certifying official's recommendation, criticality, and mission needs, unless otherwise indicated.) I acknowledge the checklist findings.

15. PRINTED NAME (CDR or AG)		16. RANK		17. TITLE		18. SIGNATURE	
19. DATE (YYYYMMDD)		20. UNIT		21. ADDRESS			
22. PHONE NUMBER		23. E-MAIL ADDRESS			24. DSN NUMBER		25. FAX NUMBER

**Part D - DCS Validation:** ALL DEPLOYMENT CYCLE SUPPORT requirements are updated and all DCS requirements completed.

26. PRINTED NAME (Validation Official)		27. RANK		28. TITLE		29. SIGNATURE	
30. DATE (YYYYMMDD)		31. UNIT		32. ADDRESS			
33. PHONE NUMBER		34. E-MAIL ADDRESS			35. DSN NUMBER		36. FAX NUMBER

NAME (Last, First Middle)			SSN	
Deployment Cycle Support Tasks	<b>DCS VALIDATION</b>			
	<b>COMPLETED</b>	<b>NOT COMPLETED</b>	<b>NA</b>	<b>DATE (YYYYMMDD)</b>
<b>SECTION I - Train-up / Preparation Stage</b>				
<b>Unit Commander / Unit Leadership</b>				
Single Soldiers identified and support ensured				
Leave schedule published				
Investigations (e.g. Line of Duty, AR 15-6) initiated and completed, as required				
Individual career counseling provided, as required				
Disciplinary and adverse administrative actions finalized, as required				
Sexual Assault Prevention and Response training (Host Country, risk reduction factors) conducted				
DA Form 5305-R (Family Care Plan) completed				
FRG assessed, trained, and resourced				
RDC has completed all training prior to unit deployment				
Family readiness plan including unit readiness goals updated				
Soldiers counseled on requirement to provide financial support to family while deployed				
OERs, NCOERs, civilian evaluations, and awards completed, as required				
Soldier counseling conducted, as required				
Soldiers identified with potential financial issues referred to financial training or assistance				
Command Climate Survey conducted				
Soldiers who PCS and TCS complete the DCS process, as required				
Soldiers encouraged to communicate with family throughout the deployment cycle				
Conduct Unit Risk Inventory (URI) NLT 30 days prior to deployment				
<b>Personnel Service Center</b>				
DD Form 93 (Record of Emergency Data) updated				
VA Form SGLV 8285, (Request for Insurance (SGLI)) completed				
VA Form SGLV 8286, (Service Member's Group Life Insurance) completed				
VA Form SGLV 8285A, (Request for Family Coverage (SGLI)) completed				
VA Form SGLV 8286A, (Family Coverage Election (SGLI)) completed				
Eligibility for overseas deployment (AR 614-30, Overseas Service) verified				
Soldiers with record of misdemeanor crime of domestic violence identified				
Passports issued to DA civilians in receipt of Deployment Orders				
MMRB, MEB, PEB conducted, as required				
Soldiers and family members educated regarding the impact of personnel policies				
SIGNATURE OF CERTIFYING OFFICIAL		8b. E-MAIL ADDRESS		DATE (YYYYMMDD)

NAME (Last, First Middle)			SSN	
Deployment Cycle Support Tasks	DCS VALIDATION			
	COMPLETED	NOT COMPLETED	NA	DATE (YYYYMMDD)
<b>SECTION I - Train-up / Preparation Stage (Continued)</b>				
<b>Unit Ministry Team / Installation Chaplain</b>				
Families identified with reported predeployment stress, as required				
Spouses provided opportunity to take marital assessment instrument, as required				
Soldiers provided opportunity to complete marital assessment instrument, as required				
Opportunity to attend voluntary marriage education/enrichment workshops provided, as required				
Predeployment Battlemind training for leaders conducted				
Predeployment Battlemind training for junior enlisted Soldiers conducted				
<b>Medical / Dental Health Teams</b>				
Leader training on identifying symptoms of distress and suicide tendencies conducted				
Individuals screened for profile for permanent geographic or climate duty limitation, as required				
Preventative Medicine briefing to defeat disease and non-battle injuries conducted				
DD Form 2795 (Pre-Deployment Health Assessment Questionnaire) completed				
<b>Military Pay Office</b>				
Current status of DoD charge card holders reviewed				
Travel advance provided for Soldiers with TCS orders				
<b>Legal Assistance Office</b>				
Wills updated				
Power of Attorney provided				
Counseling on civil matters provided				
Legal assistance to RC Soldiers provided, as required				
Tax class / information for spouses provided, as required				
<b>Installation Management Command</b>				
Family Readiness staff shortages (ACS / FAC) identified, as required				
AA and RC Family Readiness Groups educated on available services				
Families educated about services provided through Military OneSource				
Predeployment Battlemind training for spouses conducted				
Operation READY Deployment and Children training				
Conduct Financial Management Planning for Deployments training				
<b>DEERS / RAPIDS / ID Card Office</b>				
ID Cards / ID Tags updated, as required				
DEERS / RAPIDS enrollment completed, as required				
DEERS / RAPIDS data entry and date for residential address completed, as required				
SIGNATURE OF CERTIFYING OFFICIAL	8b. E-MAIL ADDRESS			DATE (YYYYMMDD)

NAME (Last, First Middle)		SSN			
Deployment Cycle Support Tasks		DCS VALIDATION			
		COMPLETED	NOT COMPLETED	NA	DATE (YYYYMMDD)
<b>SECTION II - Mobilization Stage (RC Soldiers)</b>					
<b>Unit Commander / Unit Leadership</b>					
Investigations (e.g. Line of Duty, AR 15-6) initiated and completed, as required					
Disciplinary and adverse administrative actions finalized, as required					
Sexual Assault Prevention and Response training (Host Country, risk reduction factors) conducted					
DA Form 5305-R (Family Care Plan) completed					
FRG assessed, trained, and resourced					
RDC has completed all training prior to unit deployment					
Family readiness plan including unit readiness goals updated					
Soldiers counseled on requirement to provide financial support to family while deployed					
OERs, NCOERs, civilian evaluations, and awards completed, as required					
Soldier counseling conducted, as required					
Soldiers identified with potential financial issues referred to financial training or assistance					
Personnel Reporting System updated					
CIVTRACKS for DA civilians updated					
Soldiers who PCS and TCS complete the DCS process, as required					
Soldiers encouraged to communicate with family throughout the deployment cycle					
Conduct Unit Risk Inventory (URI) NLT 30 days prior to deployment					
<b>Personnel Service Center</b>					
DD Form 93 (Record of Emergency Data) updated					
VA Form SGLV 8285, (Request for Insurance (SGLI)) completed					
VA Form SGLV 8286, (Service Member's Group Life Insurance) completed					
VA Form SGLV 8285A, (Request for Family Coverage (SGLI)) completed					
VA Form SGLV 8286A, (Family Coverage Election (SGLI)) completed					
Eligibility for overseas deployment (AR 614-30, Overseas Service) verified					
Soldiers with record of misdemeanor crime of domestic violence identified					
Passports issued to DA civilians in receipt of Deployment Orders					
Soldiers and family members educated regarding the impact of personnel policies					
DD Form 2365 (DoD Civilian Employee Overseas E-E Position Agreement) completed					
Ensured all Soldiers processed correctly					
MMRB, MEB, PEB conducted, as required					
SIGNATURE OF CERTIFYING OFFICIAL		8b. E-MAIL ADDRESS		DATE (YYYYMMDD)	

NAME (Last, First Middle)			SSN	
Deployment Cycle Support Tasks	<b>DCS VALIDATION</b>			
	<b>COMPLETED</b>	<b>NOT COMPLETED</b>	<b>NA</b>	<b>DATE (YYYYMMDD)</b>
<b>SECTION II - Mobilization Stage (RC Soldiers) (Continued)</b>				
<b>Unit Ministry Team / Installation Chaplain</b>				
Suicide Awareness and Prevention training conducted, as required				
Families identified with reported predeployment stress, as required				
Spouses provided opportunity to take marital assessment instrument, as required				
Soldier provided opportunity to complete marital assessment instrument, as required				
Predeployment Battlemind training for leaders conducted				
Predeployment Battlemind training for junior enlisted Soldiers conducted				
Suicide Intervention Skills Training for Leaders and Gatekeepers				
<b>Medical / Dental Health Teams</b>				
Leader training on symptoms of distress and suicide tendencies conducted				
Individuals screened for profile for permanent geographic or climate duty limitations, as required				
Preventative Medicine briefing to defeat disease and non-battle injuries provided				
DD Form 2795 (Pre-Deployment Health Assessment Questionnaire) completed				
Behavioral Health Assessments conducted				
Medical record review conducted				
TRICARE benefits briefing conducted				
DA Form 3349 (Medical Profile) completed, as required				
<b>Military Pay Office</b>				
Current status of DoD charge card holders reviewed				
Travel advance provided for Soldiers with TCS orders				
Financial briefings conducted				
Allotment changes expedited				
BAH for AGR Soldiers adjusted				
Entitlements / Special Pay reviewed				
<b>Legal Assistance Office</b>				
Wills updated, as required				
Power of Attorney provided, as required				
Counseling on civil matters provided				
Personnel informed on legal rights under Servicemembers' Civil Relief Act (SCRA)				
RC personnel informed on legal rights under SCRA				
Legal assistance to RC Soldiers provided, as required				
Tax classes / information for spouses provided, as required				
SIGNATURE OF CERTIFYING OFFICIAL	8b. E-MAIL ADDRESS			DATE (YYYYMMDD)

NAME (Last, First Middle)			SSN	
Deployment Cycle Support Tasks	DCS VALIDATION			
	COMPLETED	NOT COMPLETED	NA	DATE (YYYYMMDD)
<b>SECTION II - Mobilization Stage (RC Soldiers) (Continued)</b>				
<b>Installation Management Command</b>				
Family Readiness staff shortages (ACS / FAC) identified, as required				
Coordinated with State Adjutant General for family member ACS eligibility				
Families with major problems requiring special assistance identified				
Family members provided toll free number to ACS				
AA and RC Family Readiness Groups educated on available services				
Families educated about services provided through Military OneSource				
Education and information materials provided to IRR / IMA families				
Operation READY Predeployment Battlemind training for families conducted				
Operation READY Deployment and Children training				
Conduct Financial Management Planning for Deployments training				
<b>DEERS / RAPIDS / ID Card Office</b>				
ID Cards / ID Tags updated, as required				
DEERS / RAPIDS enrollment completed, as required				
DEERS / RAPIDS data entry and date for residential address completed, as required				
DD Form 1934 (Geneva Convention ID Card for Medical and Religious Personnel) issued				
DD Form 489 (Geneva Convention ID Card for Civilian Personnel) issued				
<b>SECTION III - Deployment Stage</b>				
<b>Unit Ministry Team / Installation Chaplain</b>				
Families identified with reported predeployment stress, as required				
<b>Legal Assistance Office</b>				
Continue to provide counseling to families on civil matters, as required				
Continue to provide tax classes / information to spouses, as required				
<b>Legal Assistance Office</b>				
AA and RC Family Readiness Groups educated on available services, as required				
Family members educated about services provided through Military OneSource, as required				
Education and information materials provided to IRR / IMA families, as required				
<b>DEERS / RAPIDS / ID Card Office</b>				
ID Cards / ID Tags updated, as required				
DEERS / RAPIDS enrollment completed, as required				
SIGNATURE OF CERTIFYING OFFICIAL			8b. E-MAIL ADDRESS	
			DATE (YYYYMMDD)	

NAME (Last, First Middle)			SSN	
Deployment Cycle Support Tasks	<b>DCS VALIDATION</b>			
	<b>COMPLETED</b>	<b>NOT COMPLETED</b>	<b>NA</b>	<b>DATE (YYYYMMDD)</b>
<b>SECTION IV - Employment Stage</b>				
<b>Unit Commander / Unit Leadership</b>				
Leave schedule published for R&R personnel				
Investigations (e.g. Line of Duty, AR 15-6) initiated and completed, as required				
Individual career counseling provided, as required				
Soldiers counseled on requirement to provide financial support to family, as required				
OERs, NCOERs, civilian evaluations, and awards completed, as required				
Soldier counseling conducted, as required				
Substance Abuse briefing conducted for R&R personnel				
Risk Reduction Reintegration Tip Card utilized for R&R personnel				
Safety briefings conducted on POV, etc. for R&R personnel				
Soldiers who PCS and TCS complete the DCS process, as required				
Soldiers encouraged to communicate with family throughout the deployment cycle				
Sexual Assault Prevention and Response Training (Host Country, risk reduction factors) conducted				
<b>Unit Ministry Team / Installation Chaplain</b>				
Suicide Awareness and Prevention training conducted for R&R personnel				
Families identified with reported predeployment stress, as required				
Small group discussions on deployment experiences facilitated, as required				
Operation READY Reunion / Reintegration training for Soldier's prior to R&R leave				
Communication with Spouses, Families, and Children training conducted for R&R personnel				
Post-Deployment Battlemind training for Soldiers conducted (prior to R&R leave)				
<b>Installation Management Command</b>				
Families with major problems requiring special assistance identified, as required				
Families educated about services provided through Military OneSource, as required				
Families identified and referred who have experienced major problems, as required				
Education and information materials provided to IRR / IMA families, as required				
Operation READY Deployment and Children training (prior to Soldier's R&R leave)				
Operation READY Post-Deployment Battlemind training for families conducted (prior to R&R leave)				
Operation READY Reunion / Reintegration training for spouses (prior to Soldier's R&R leave)				
SIGNATURE OF CERTIFYING OFFICIAL		8b. E-MAIL ADDRESS		DATE (YYYYMMDD)

NAME (Last, First Middle)			SSN	
Deployment Cycle Support Tasks	<b>DCS VALIDATION</b>			
	<b>COMPLETED</b>	<b>NOT COMPLETED</b>	<b>NA</b>	<b>DATE (YYYYMMDD)</b>
<b>SECTION IV - Employment Stage (Continued)</b>				
<b>Legal Assistance Office</b>				
Counseling on civil matters provided, as required				
Tax classes / information for spouses provided, as required				
<b>DEERS / RAPIDS / ID Card Office</b>				
ID Cards / ID Tags updated, as required				
DEERS / RAPIDS enrollment completed, as required				
DEERS / RAPIDS data entry and date for residential address completed, as required				
<b>SECTION V - Redeployment Stage</b>				
<b>Unit Commander / Unit Leadership</b>				
Single Soldiers identified and support ensured				
Unit Refresher / Army Sexual Assault Prevention and Response training completed				
Leave schedule published				
Investigations (e.g. Line of Duty, AR 15-6) initiated and completed, as required				
Disciplinary and adverse administrative actions finalized, as required				
Soldiers counseled on requirement to provide financial support to family while deployed				
OERs, NCOERs, civilian evaluations, and awards completed, as required				
Soldier counseling conducted, as required				
Soldiers identified with potential financial issues referred to financial training or assistance				
Personnel Reporting System updated				
CIVTRACKS for DA civilians updated				
RDC provided with updated redeployment rosters				
Risk Reduction Reintegration Tip Card utilized				
Plan and coordinate reunion and homecoming ceremonies				
Soldiers who PCS and TCS complete the DCS process, as required				
<b>Unit Ministry Team / Installation Chaplain</b>				
Suicide Awareness and Prevention training conducted				
Families with reported stress and separation issues identified, as required				
Small group discussions on deployment experiences facilitated				
Operation READY Reunion / Reintegration training for Soldier's conducted				
Communication with Spouses, Families, and Children training conducted				
Spouses provided opportunity to take marital assessment				
SIGNATURE OF CERTIFYING OFFICIAL	8b. E-MAIL ADDRESS			DATE (YYYYMMDD)



NAME (Last, First Middle)			SSN	
Deployment Cycle Support Tasks	DCS VALIDATION			
	COMPLETED	NOT COMPLETED	NA	DATE (YYYYMMDD)
<b>SECTION V - Redeployment Stage (Continued)</b>				
<b>Personnel Service Center</b>				
MMRB, MEB, PEB conducted, as required				
<b>Medical / Dental Health Teams</b>				
Leader training on symptoms of distress and suicide tendencies conducted				
Individuals screened for medical profile geographic or climate duty limitation, as required				
Behavioral Health Assessments conducted				
Soldiers with behavioral or health issues referred				
Potential family issues identified				
Health Threat briefing for childcare providers conducted				
Health Threat briefing for spouses conducted				
Behavioral Health Threat briefing to alert families conducted				
Medical Threat briefing for Soldiers and DA civilians conducted				
Negative health-related behaviors treated and documented (DD Form 2796)				
<b>Legal Assistance Office</b>				
Provide counseling to families on civil matters, as required				
Personnel informed on legal rights under Servicemember's Civil Relief Act (SCRA), as required.				
Legal assistance to RC Soldiers provided, as required				
Continue to provide tax classes / information to spouses, as required				
<b>Installation Management Command</b>				
Family Readiness staff shortages (ACS / FAC) identified, as required				
Families with major problems requiring special assistance identified, as required				
AA and RC Family Readiness Groups educated on available services				
Families educated about services provided through Military OneSource, as required				
Families identified and referred who have experienced major problems				
Reunion / Reintegration training provided to Soldier's spouses				
FAP program managers and SFPD directors reestablish case continuity				
Employers involved in home station activities				
Education and information materials provided to IRR / IMA families				
DCS information provided to family members				
Communication with Spouses, Families, and Children training				
<b>DEERS / RAPIDS / ID Card Office</b>				
ID Cards / ID Tags updated, as required				
DEERS / RAPIDS enrollment completed				
SIGNATURE OF CERTIFYING OFFICIAL	8b. E-MAIL ADDRESS			DATE (YYYYMMDD)

NAME (Last, First Middle)		SSN		
Deployment Cycle Support Tasks	<b>DCS VALIDATION</b>			
	<b>COMPLETED</b>	<b>NOT COMPLETED</b>	<b>NA</b>	<b>DATE (YYYYMMDD)</b>
<b>SECTION VI - Post - Deployment Stage</b>				
<b>Unit Commander / Unit Leadership</b>				
Unit Refresher / Army Sexual Assault Prevention and Response training, as required				
Individual career counseling provided, as required				
Investigations (e.g. Line of Duty, AR 15-6) initiated and completed, as required				
Disciplinary and adverse administrative actions finalized, as required				
OERs, NCOERs, civilian evaluations, and awards completed, as required				
Soldier counseling conducted, as required				
Soldiers identified with potential financial issues referred to financial training or assistance				
Personnel Reporting System Updated				
CIVTRACKS for DA civilians updated				
Substance Abuse briefing conducted				
Risk Reduction Reintegration Tip Card utilized, as required				
Execute reunion and homecoming ceremonies				
Safety briefings conducted on POV, etc.				
Operator Licenses, registrations, insurance policies, and safety inspections verified				
Preseparation counseling (DD Form 2648-1) for RC Soldiers conducted				
ACAP services provided to affected Soldiers				
Soldiers who PCS and TCS complete the DCS process, as required				
Soldiers encouraged to communicate with family throughout the deployment cycle				
<b>Personnel Service Center</b>				
DD Form 93 (Record of Emergency Data) updated, as required				
VA Form SGLV 8285, (Request for Insurance (SGLI)) completed, as required				
VA Form SGLV 8286, (Service Member's Group Life Insurance) completed, as required				
VA Form SGLV 8285A, (Request for Family Coverage (SGLI)) completed, as required				
VA Form SGLV 8286A, (Family Coverage Election (SGLI)) completed, as required				
Eligibility for overseas deployment (AR 614-30, Overseas Service) verified, as required				
Soldiers and family members educated regarding the impact of personnel policies				
Ensured all Soldiers processed correctly				
RC Soldiers advised of 18-year sanctuary				
RC Soldiers reenrolled in MGIB and state tuition assistance programs				
MMRB, MEB, PEB conducted, as required				
SIGNATURE OF CERTIFYING OFFICIAL	8b. E-MAIL ADDRESS		DATE (YYYYMMDD)	

NAME (Last, First Middle)		SSN			
Deployment Cycle Support Tasks		DCS VALIDATION			
		COMPLETED	NOT COMPLETED	NA	DATE (YYYYMMDD)
<b>SECTION VI - Post - Deployment Stage (Continued)</b>					
<b>Unit Ministry Team / Installation Chaplain</b>					
Suicide Awareness and Prevention training conducted, as required					
Families with reported stress and separation issues identified, as required					
Small group discussions on deployment experiences facilitated, as required					
Spouses provided opportunity to take marital assessment					
Soldiers complete marital assessment instrument					
Post-Deployment Battlemind training for Soldiers conducted					
<b>Medical / Dental Health Teams</b>					
Individuals screened for medical profile geographic or climate duty limitations, as required					
Medical record review conducted					
TRICARE benefits briefing conducted					
Soldiers with behavioral or health issues referred, as required					
Medical Threat briefing conducted, as required					
Negative health-related behaviors treated and documented (DD Form 2796), as required					
Health care extended to DA civilians for deployment related conditions					
DA Form 3349 (Medical Profile) completed					
Initial TB Test completed					
Serum specimens drawn at return to home station (AA) / and DEMOB Station (RC)					
Permanent health record updated with deployment health record					
<b>Military Pay Office</b>					
Current status of DoD charge card holders reviewed					
Travel advance provided for Soldiers with TCS orders					
Financial briefings conducted					
Allotment changes expedited					
BAH for AGR Soldiers adjusted					
Entitlements / Special Pay reviewed					
SIGNATURE OF CERTIFYING OFFICIAL		8b. E-MAIL ADDRESS		DATE (YYYYMMDD)	

NAME (Last, First Middle)		SSN		
Deployment Cycle Support Tasks	<b>DCS VALIDATION</b>			
	<b>COMPLETED</b>	<b>NOT COMPLETED</b>	<b>NA</b>	<b>DATE (YYYYMMDD)</b>
<b>SECTION VI - Post - Deployment Stage (Continued)</b>				
<b>Legal Assistance Office</b>				
Wills updated, as required				
Power of Attorney Provided, as required				
Counseling on civil matters provided, as required				
Personnel informed on legal rights under Servicemember's Civil Relief Act (SCRA), as required				
RC personnel informed on legal rights under SCRA				
Legal assistance to RC Soldiers provided, as required				
Tax classes / information for spouses provided, as required				
Claims for personal property submitted				
<b>Installation Management Command</b>				
Family Readiness staff shortages (ACS / FAC) identified, as required				
AA and RC Family Readiness Groups educated on available services, as required				
Families educated about services provided through Military OneSource, as required				
Families identified and referred who have experienced major problems, as required				
DA civilians referred to the Employee Assistance Program Coordinator, as required				
DA civilians informed of the Office of Worker's Compensation Programs process				
Operation READY Reunion / Reintegration training for Soldiers and spouses				
Operation Ready Communication with Spouses, Families, and Children training				
Operation Ready Post-Deployment Battlemind training for families completed				
<b>DEERS / RAPIDS / ID Card Office</b>				
ID Cards / ID Tags updated, as required				
DEERS / RAPIDS enrollment completed, as required				
SIGNATURE OF CERTIFYING OFFICIAL	8b. E-MAIL ADDRESS		DATE (YYYYMMDD)	

NAME (Last, First Middle)		SSN			
Deployment Cycle Support Tasks		DCS VALIDATION			
		COMPLETED	NOT COMPLETED	NA	DATE (YYYYMMDD)
<b>SECTION VII - Reconstitution Stage</b>					
<b>Unit Commander / Unit Leadership</b>					
Unit Refresher / Army Sexual Assault Prevention and Response training, as required					
Investigations (e.g. Line of Duty, AR 15-6) initiated and completed, as required					
Disciplinary and adverse administrative actions finalized, as required					
OERs, NCOERs, civilian evaluations, and awards completed, as required					
Soldier counseling conducted, as required					
Soldiers with potential financial issues referred to financial training or assistance, as required					
Substance Abuse briefing conducted					
Safety briefings conducted on POV, etc., as required					
Operator licenses, registrations, insurance policies, and safety inspections verified, as required					
ACAP services provided to affected Soldiers, as required					
Command Climate Survey conducted					
RC Soldiers reintegrated into civilian workplaces					
Reintegration-Unit Risk Inventory (R-URI) conducted 120-180 days after redeployment					
Soldiers who PCS and TCS complete the DCS process, as required					
Soldiers encouraged to communicate with family throughout the deployment cycle					
<b>Unit Ministry Team / Installation Chaplain</b>					
Suicide Awareness and Prevention training conducted, as required					
Families with reported stress and separation issues identified, as required					
Small group discussions on deployment experiences facilitated, as required					
Spouses provided opportunity to take marital assessment, as required					
Soldiers complete marital assessment instrument, as required					
Opportunity to attend voluntary marriage education / enrichment workshop provided					
PDHRA Battlemind training for Soldiers conducted (recommend in conjunction with PDHRA)					
Suicide Intervention Skills Training for Leaders and Gatekeepers					
<b>Personnel Service Center</b>					
MMRB, MEB, PEB conducted, as required					
SIGNATURE OF CERTIFYING OFFICIAL		8b. E-MAIL ADDRESS		DATE (YYYYMMDD)	

NAME (Last, First Middle)		SSN			
Deployment Cycle Support Tasks		DCS VALIDATION			
		COMPLETED	NOT COMPLETED	NA	DATE (YYYYMMDD)
<b>SECTION VII - Reconstitution Stage (Continued)</b>					
<b>Medical / Dental Health Teams</b>					
Individuals screened for medical profile geographic or climate duty limitation, as required					
Behavioral Health Assessments conducted					
TRICARE benefits briefing conducted, as required					
90 day TB Test requirements completed					
Serum specimen requirements completed					
PDHRA assessments completed (recommend in conjunction with PDHRA Battlemind training)					
Permanent health record updated with deployment health record					
<b>Legal Assistance Office</b>					
Wills updated, as required					
Power of Attorney provided, as required					
Legal assistance to RC Soldiers provided					
Counseling on civil matters provided, as required					
Legal assistance to RC Soldiers provided					
Tax class / information for spouses provided, as required					
Claims for personal property submitted, as required					
<b>Installation Management Command</b>					
Family Readiness staff shortages (ACS / FAC) identified, as required					
AA and RC Family Readiness Groups educated on available services, as required					
Families educated about services provided through Military OneSource, as required					
Reunion / Reintegration training to Soldier's spouses, as required					
Post-Deployment Battlemind training for families completed, as required					
Families identified and referred who have experienced major problems					
DA civilians referred to the Employee Assistance Program Coordinator, as required					
<b>DEERS / RAPIDS / ID Card Office</b>					
ID Cards / ID Tags updated, as required					
DEERS / RAPIDS enrollment completed, as required					
SIGNATURE OF CERTIFYING OFFICIAL		8b. E-MAIL ADDRESS			DATE (YYYYMMDD)