

The following is checklist to assist in the predeployment phase of your processing. All forms mentioned below can be obtained from the UDC Website.

PREDEPLOYMENT TRAINING (Should be completed within one week after notification of assignment):

- _____ Anti-Terrorism Force Protection Training
- _____ Subversion and Espionage Directed Against the Army (SAEDA)
- _____ Human Trafficking
- _____ Composite Risk Management
- _____ Report Intelligence Activity
- _____ Personnel Recovery Training
- _____ Personal Recovery PRO-file
- _____ Cultural Training (IRAQ/AFGHANISTAN)

ADMINISTRATIVE (Should be accomplished within one week after notification of assignment)

- _____ DD Form 93 Record of Emergency
- _____ UDC Clothing Issuance Form
- _____ Itinerary, to include flights and hotel. (Must be submitted within two weeks of reporting to the UDC). Itinerary must include flights to Dulles and onward to Kuwait.
- _____ Call 888-436-5466 or 800-622-6990 for pick-up at Dulles Airport and transportation to Winchester. Please let you APPO representative know if you do not require this service.

INFORMATION MANAGEMENT (Within two weeks after notification of assignment)

- _____ Ensure you have a valid AKO Account and **KNOW YOUR USER NAME/PASSWORD.**
- _____ Ensure your personal data is loaded into the Contractor Verification System (CVS) for your common access card (CAC). Make sure you have your LOA/LOI with you when you come to the UDC.

_____ If you require access to the TAC LAN while deployed, complete the System Authorization Access Request Form.

MEDICAL (Medical appointments should be made within 48 hours after notification of your assignment) Ensure you print off this part of your checklist and take it with you to your doctor to ensure all medical tests are completed.

MEDICAL FORMS

_____ DD Form 2808, Report of Medical Exam

_____ DD Form 2807-1, Report of Medical History

_____ DD Form 2795, (needs to be filled out electronically through AKO).

_____ DD Form 2813, Report of Dental Exam

_____ DD Form 771, Eyewear Prescription. If you do not require glasses, write at the bottom of the form, "glasses not required"

_____ OSHA Respiratory Medical Evaluation Questionnaire

LABS:

_____ Urinalysis (Routine), not a drug screening

_____ Chem 7

_____ CBC

_____ LIPID Profile (over 40 years of age)

_____ G6PD (must have a normal result with taking anti-malaria medication)

_____ Blood Type/RH

_____ HIV

_____ DNA on File (Not always possible)

OTHER REQUIRED TESTS:

_____ EKG (if over 40 years of age).

_____ Audiogram (Can be annotated on the DD Form 2808)

Females

_____ *PAP smear (within one year) (Actual lab report).

_____ *Mammogram (within two years if over 40 and within one year if over 50)
(Actual Radiologist Report).

_____ Pregnancy test or waiver required upon arrival at the UDC.

IMMUNIZATIONS

_____ ANTHRAX

_____ HEPATITIS A

_____ HEPATITIS B

_____ INFLUENZA _____

_____ MMR (Measles, Mumps, Rubella) (As an adult, once in a lifetime). People born before 1957 do not require a MMR vaccine. MMR should be given either simultaneously or 30 days before receiving anticipated smallpox vaccination.

_____ POLIO (oral or IM) (As an adult, once in a lifetime)

_____ SMALLPOX (Administration per the latest DoD Guidance) required every 10 years. Must complete [Smallpox Vaccination Pre-Screening Form](#) and have it reviewed by a Health Care Provider at the UDC site prior to receiving immunization.

_____ TETANUS / DIPHTHERIA

_____ TUBERCULIN SKIN TEST (PPD)

_____ TYPHOID