Reserve Component Soldier Statement of Understanding (SOU) for Outside the Continental United States (OCONUS) Permanent Change of Station (PCS) Unaccompanied Voluntary Tours

This document may be completed manually and signed or digitally and signed by the Soldier requesting the tour. Upon completion, upload the form to your Tour of Duty (TOD) packet under the "Special Notes" tab and notify your Force Requestor.

Part I – Personnel Administrative Data

1. Name (Last, First, Middle)	2. Rank/Grade	3.Telephone
4. enterprise email	5. DOD ID#	
6. Soldier Status	7. Force Requestor	
☐ ARNG ☐ USAR ☐ IMA ☐ Retiree Recall		

Part II – Soldier Acknowledgement

Initial Each	*Read, provide and or acknowledge the following information:*
☐	I will have days of leave accrued when this tour begins.
☐	I understand I must have an active Defense Travel System (DTS) profile and that I must obtain release from my home station DTS hierarchy before departing for the Combat Readiness Center (CRC).
☐	I understand I must possess an active Government Travel Charge Card (GTCC) before I depart for CRC.
☐	I understand that mission requirements and priorities may change causing my duties to differ from the Tour of Duty (TOD) duty description. I commit to fulfill these duties regardless of any pre-conceived notion or expectation.
☐	I understand that my TOD is subject to the availability of funds for tours that cross fiscal years.
☐	I have verified that my Primary Residence is correct in my Component HR system (i.e. SIDPERS, IWS, eMILPO, RLAS, etc) as well as in TOD and MyPay. I understand that failure to verify correct primary residence will result in an incorrect address on my orders, which impacts travel to CRC and BAH (if authorized).
☐	I understand that I must update my primary residence BEFORE my orders are published or unless an admin error at the time order was issued is proven, the primary residence will remain as stated once orders are published.
☐	This is an unaccompanied tour. I am NOT authorized movement/relocation of dependents at government expense.
☐	I may be authorized Household Goods (HHG) shipment based on the tour of duty selected below.
☐	I may be authorized Personally Owned Vehicle (POV) shipment based on the tour of duty selected below.
☐	I understand that local housing rules apply and I will be authorized Basic Allowance for Subsistence: ❑ *If I reside in government quarters and I am issued a meal card, I will have automatic meals deductions from my payroll.* ❑ *If I reside in government quarters or off post, I will pay for meals consumed at the military dining facility.*
	form continued on page 2

Part II – Soldier Election	
Without Dependents	I elect the following tour with appropriate entitlements (select only one):
	☐ 365 day tour, (HHG/POV shipment not authorized); authorized BAH without dependent based on the primary residence; authorized OCONUS Cost of Living Adjustment (COLA) based on Permanent Duty Station (PDS). ☐ 365 day tour, (10% HHG shipment may be authorized/POV shipment not authorized); authorized OHA without dependent based on PDS if government quarters not assigned; authorized OCONUS COLA based on PDS. ☐ 730 day tour, (HHG at without dependents rate/POV shipment authorized); authorized OHA without dependent based on PDS if government quarters not assigned; authorized OCONUS COLA based on PDS.
With Dependents	I elect the following tour with appropriate entitlements (select only one):
	☐ 365 day tour, (HHG/POV shipment not authorized); authorized BAH with dependent based on primary residence; authorized OHA without dependent based on PDS if government quarters not assigned; authorized OCONUS COLA based on PDS. ☐ 365 day tour, (10% HHG shipment may be authorized/POV shipment not authorized); authorized BAH with dependent based on primary residence; authorized OHA without dependent based on PDS if government quarters not assigned; authorized OCONUS COLA based on PDS. ☐ 730 day tour, (HHG at without dependent rate/POV shipment authorized); authorized BAH with dependent based on primary residence; authorized OHA without dependent based on PDS if government quarters not assigned; authorized OCONUS COLA based on PDS.

Part III – Request 10% HHG Exception to Policy	
Complete this section ONLY if you selected 365 days above and want to request an exception to policy to allow for shipment of 10% of your authorized HHG in accordance with the Joint Travel Regulation (JTR) FORCE REQUESTOR: Gather this statement, applicable documents outlined below and submit via TMT to SAMR-MP-MPP. Allow 30 days for staffing/approval.	
Initial	*Read, provide and or acknowledge the following information:*
☐	I acknowledge that under the 10% HHG shipment option, a 10% HHG ETP must be approved **prior** to the publication of orders.
☐	I acknowledge that a 10% HHG shipment authorization will result in the forfeit of my primary residence BAH (Soldiers without dependents only; w/dep Soldiers will retain w/dep rate for primary residence).
☐	To submit for 10% HHG ETP, through my Force Requestor, I will provide this signed and completed SOU and a statement of non-availability (SNA) from the duty location housing official.
☐	Upon approval of my 10% HHG ETP, I will upload the supporting documentation into my “Special Notes” portion of the TOD for orders officials to include HHG shipment authorization in my orders.

Part IV – Soldier Signature		
Signature		*Date (YYYYMMDD)*