



DEPARTMENT OF THE ARMY  
UNITED STATES ARMY INSTALLATION MANAGEMENT COMMAND  
HEADQUARTERS, U.S. ARMY GARRISON-YONGSAN  
UNIT #15333  
APO AP 96205-5333

24 MAR. 2017.

IMYN-ZA

**UNITED STATES ARMY GARRISON-YONGSAN (USAG-Y) POLICY LETTER # 5**

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Funded Emergency Leave (EML) Policy

1. **REFERENCES:**

- a. Joint Travel Regulation (JTR).
- b. Army Regulation (AR) 600-8-10, Leave and Pass, Chapter 6, 15 Feb 2006.

2. **PURPOSE:** To inform the Command and dependents on the proper procedure necessary for Funded Emergency Leave requests.

3. **APPLICABILITY:** This policy applies to all U.S. Army Soldiers and their Command Sponsored Dependents assigned to USAG-Y as permanent party, or those attached to units stationed on, or located within, the Yongsan geographical area.

4. **GENERAL:**

a. **APPROVAL AUTHORITY:** A Soldier or a command-sponsored family member can request Emergency Leave travel with or without American Red Cross verification. The Unit Commander is the approval authority. If anyone other than the Unit Commander approves, the form must have the "Assumption of Command Authority" document. Existence of a Red Cross Message does not automatically warrant emergency leave circumstances. However, emergency leave funding is processed through Military Personnel Division (MPD) and requires evaluation and determination of eligibility for Government funded travel. The Soldier's command does not have the authority to fund EML travel. This means that the Red Cross Message is required by the MPD for evaluation and determination to submit to the budget analysis to fund the travel. The EML Command verification form is required. The process will begin and end at the Unit S1.

b. **PERSON AFFECTED BY THE EMERGENCY:** Soldiers may be authorized emergency leave for up to 30 days for emergencies within their immediate family. For a person in loco parentis, the Soldier must have a signed statement in his/her record

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verifying loco parentis. When the spouse claims loco parentis, the Soldier is required to sign a counseling statement verifying loco parentis. For situations when a Soldier is not present to sign the statement, the spouse may sign these documents with a valid Power of Attorney.

1. Immediate Family Members, for the Soldier or the Soldier's spouse, include:

- a. Parents, including Step-Parents
- b. Spouse
- c. Children, including Step-Children(s)
- d. Sisters, including Step-Sister(s)
- e. Brothers, including Step-Brothers
- f. Only living blood relative(s)
- g. A person in loco parentis

2. In Loco Parentis, for the Soldier or the Soldier's Spouse:

A person in loco parentis is one who stood in place of a parent to the Soldier or the Soldier's spouse for 24 hours a day, for at least a five-year period before the Soldier or Soldier's spouse became 21 years of age. The person must have provided home, food, clothing, and medical care and other necessities. In any case, where the person has stood in place of a person when either parent also lived at the same residence, the person is not considered in loco parentis for performing baby-sitting or providing day care services. The In Loco Parentis form is attached to this policy.

#### **5. PROCEDURES FOR PROCESSING EMERGENCY LEAVE FOR FUNDING:**

a. The Unit Commander should evaluate the situation to determine the criteria as mentioned above for Emergency Leave, utilizing the information referenced above. If deemed a valid emergency leave should take place, the unit will process a DA Form 31 (Leave Form) IAW AR 600-8-10. The approved leave form should contain all necessary information, to include the Control Number (Block 1), the type of leave (Emergency) and the Unit Commander's signature. All approved requests will be forwarded to the Area II MPD group email box at [usarmy.yongsan.imcom-pacific.list.mpd-area-2-emergency-leaves](mailto:usarmy.yongsan.imcom-pacific.list.mpd-area-2-emergency-leaves).

b. If a command-sponsored dependent(s) will be traveling without the Soldier, the Unit Commander will complete a memorandum that will include the specific information extracted from DA Form 31. An example memorandum for dependents traveling "without the Soldier" for Emergency Leave purposes will be provided. Some of the information required on this memo includes the Soldier's basic information, leave address, and lists dependents that will be traveling. This document is to be processed

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in the same manner as the DA Form 31; it must meet the criteria mentioned above and be signed by the Soldier's Unit Commander.

c. The DA Form 31, and/or Memorandum for Family members traveling "without the Soldier", will be forwarded to the Area II MPD group email box at **usarmy.yongsan.imcom-pacific.list.mpd-area-2-emergency-leaves**. The Red Cross Message should accompany the DA Form 31 and memo. MPD representative will ensure that the commander has approved the Soldier's leave and that the situation meets the criteria mentioned in AR 600-8-10. Verification of command-sponsored dependents will be completed before providing the fund cite for funded emergency leave. For requests after normal business hours, please contact the MPD at **010-8522-8602**. EML funding requests are based on the Soldier's physical location not the Command.

d. If the Soldier resides outside of Area II, the contact numbers and group email box for funded emergency leaves for the other areas are:

Area I – 315-730-6206 – Leave a message during after hours  
usarmy.casey.imcom-korea.list.usag-casey-military-pers-@mail.mil

Area III – 315-753-7327 – Leave a message during after hours  
usarmy.humphreys.imcom-pacific.list.mpd-usag-h-reassignments@mail.mil

Area IV – 315-768-6954 – Leave a message during after hours  
usarmy.henry.imcom-pacific.list.area-4-mpd-orders@mail.mil

7. The point of contact for this policy is the Director, Directorate of Human Resources at DSN 315-738-5017.

Encls:

1. In Loco Parentis Statement
2. Command Funded EML Verification Statement
3. Memorandum for Emergency Travel for Dependents



J. SCOTT PETERSON  
COL, CA  
Commanding

DISTRIBUTION:

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## IN LOCO PARENTIS STATEMENT

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ Red Cross MSG/Case #: \_\_\_\_\_

Red Cross MSG attached?  YES,  NO      Is the Soldier Command Sponsored?  YES  NO

Are dependents traveling with Soldier/Spouse?  YES  NO

**What is the definition of "Person standing In Loco Parentis"?:** A person who stood in place of a parent for the service member 24 hours a day for a period of at least 5 years before the service member became 21 years old or entered military service. The person must have provided home, food, clothing, medical care and other necessities, as well as furnished moral and disciplinary guidance and affection. A grandparent or other person normally is not considered to have stood in place of a parent, when the parent also lived at the same residence. Neither is a person considered in loco parentis for performing baby-sitting or providing day care service.

I am requesting emergency leave for a family emergency. The emergency involves a person who stood in loco parentis for **five years before I became twenty-one years of age**. The person in loco parentis:

- First name: \_\_\_\_\_, Last name: \_\_\_\_\_
- Street address/No P.O. Box: \_\_\_\_\_
- City: \_\_\_\_\_, State: \_\_\_\_\_, Zip Code: \_\_\_\_\_
- Relationship to Soldier/Spouse: \_\_\_\_\_
- Qualifying period of time: \_\_\_\_\_ to \_\_\_\_\_

a. The person stood in place of my parent(s). The person provided a home, financial responsibility, food, clothing, medical care, and other necessities as well as furnished moral and disciplinary guidance and personal affection.

b. My natural parents **are / are not (circle one)** living.

c. I certify that my parent(s) did not live at the same residence as the person who stood in loco parentis during the qualifying period. \_\_\_\_\_ (Soldier initials)

d. During the period of time specified, I **was / was not (circle one)** under the parental control of this person.

e. He/she **is / is not (circle one)** my legally appointed guardian, certified under a court order of adoption or guardianship.

f. The circumstances under which I became a member of the ill/deceased person's household, under his/her custody, are as follows:

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I certify that the above statement is true and complete to the best of my knowledge. I understand that the penalty for willfully making a false claim is a maximum fine of \$10,000.00, maximum imprisonment of five years, or both. (Section 287, Title 10, United States Code)

**SOLDIER:**

**WITNESS (Command Representative):**

\_\_\_\_\_  
Soldier Printed Name & Rank

\_\_\_\_\_  
Printed Name & Rank

\_\_\_\_\_  
Soldier Signature

\_\_\_\_\_  
Signature

## **COMMAND FUNDED EML VERIFICATION STATEMENT**

(\*\*This form is to accompany each Funded EML request\*\*)

(Check appropriate box or boxes below)

### **Guidelines for authorizing emergency leave funded travel are as follows:**

(1) When the soldier's presence will contribute to the welfare of a terminally ill member of the immediate family when the **expected date of death is within the month.**

(2) Because of the death of an immediate family member.

(3) For a serious situation involving accident, illness, or major surgery that cannot be postponed due to the urgency of the medical condition. The situation must result in a serious family problem. The family problem must impose important responsibilities on the Soldier that must be met immediately and cannot be accomplished from his/her duty station or by any other individual(s) or by other means.

(4) Because a Soldier is affected personally by a disaster (for example, hurricane, tornado, or flood) when severe or unusual hardship would be encountered if the soldier failed to return home.

### **Guidelines for other types of situations where a soldier may request emergency leave for situations within the immediate family, and does not warrant "funded" travel, but where ordinary leave should be considered, are as follows:**

(1) Pregnancy of spouse and childbirth. (Request should be approved if a severe life threatening situation is documented.)

(2) Marital problems that need resolving, threatened divorce, or other personal problems. (Request should be approved if a severe life threatening situation is documented.)

(3) To attend court hearings to resolve financial problems. (Money spent on emergency leave may aggravate problem.)

(4) To assist in harvesting crops or participating in managing business firms.

(5) Psychoneurosis based on family separation. (Exceptions may be made when the attending physician believes that a severe psychotic episode is indicated and the member's return might prevent institutionalization.)

(6) To settle estate of a deceased relative.

(7) Situations involving a grandparent (not in loco parentis) aunt, uncle, cousin, niece, or nephew (when not the only living blood relative) or for a friend, or fiancée.

**COMMAND FUNDED EML VERIFICATION STATEMENT**

(\*\*This form is to accompany each Funded EML request\*\*) (Check appropriate box or boxes below)

- I/we have verified that this Soldier has properly completed and initialed the “In Loco Parentis” form.
  - I/we have verified that this Soldier/Spouse meets the requirement outlining in AR 600-8-10, CH 6 for a **“funded”** emergency leave.
  - The Red Cross Message is attached.
  - This Soldier physically resides in Area II.
  - Soldier is the only child.
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The person in which the requesting Soldier/Soldier’s spouse falls into the following category: (Check appropriate box)

- (1) Parents, including stepparents.
- (2) Spouse.
- (3) Children, including stepchildren.
- (4) Sisters, including stepsisters.
- (5) Brothers, including stepbrothers.
- (6) Only living blood relative.
- (7) A person in loco parentis

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Printed Name & Rank  
S1 Representative

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Printed Name & Rank  
CDR/1SG

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Printed Name & Rank  
MPD EML Representative

Unit Letterhead

MEMORANDUM FOR Funded Emergency Leave Program, Military Personnel Division,  
Yongsan, Korea, 96205

SUBJECT: Emergency Travel for Dependent of SPC Snuffy, Joe A., 000-00-000

1. Request that the following command sponsored family members be authorized commercial transportation due to an emergency (Red Cross case #1867221) without the sponsor.

Joan Snuffy	Spouse	N/A
Joe Snuffy Jr.	Son	09 May 00

2. Destination of the emergency: 1234 Duey St, Littletown, AL 36426  
Phone number is (559) 888-8888  
Departure: 25 Sep 06  
Airport: Pensacola, FL  
Return: 05 Oct 06
3. Family Member of: SPC Snuffy, Joe A., 000-00-0000 CW2  
DEROS: 20091215  
ETS: 20091215  
Number of Months Overseas: 54  
Effective Date: 09 SEP 06  
Number of days requesting: 11

FRANKY SMITH  
CPT, MS  
Commanding

Encl  
ERB