

DODDS PACIFIC
Unfinanced Requirement (UFR) Form

Activity: DoDDS-Japan/	Requesting Official:	Point of Contact:	Date Requested:
UFR Title:	UFR Amount: \$	UFR Priority:	Program Code/Title:
UFR Description:			Strategic Goal: Goal #2 Benchmark:
Impact If Not Funded			
UFR Category Priority (check one): 1 _____ Safety/Health Hazard 2 _____ Contract/Direct School Support 3 _____ NCA Citation/Major Limitation 4 _____ DoDEA Strategic Plan Initiative 5 _____ Instructional Program Support 6 _____ Education Program Enrichment	DSO Coordination (If DoDDS PAC Hq UFR): Japan _____ Okinawa _____ Korea _____	DoDDS Pacific Coordination: LOG Div _____ PACTMO _____ IT Div _____ Procurement Div _____ Personnel Div _____ Fiscal Div _____ Ed Div _____ Director Ofc _____	
Approving Official:	PBAC Action: Approved: Yes <input type="checkbox"/> No <input type="checkbox"/> Funded: Yes <input type="checkbox"/> No <input type="checkbox"/>		Status of UFR (approved/not funded):
Date Submitted:	Date of Meeting:		

