



**DEPARTMENT OF DEFENSE
DEPENDENTS SCHOOLS
OFFICE OF THE DIRECTOR, EUROPE
UNIT 29649 BOX 7000
APO AE 09096**

July 20, 2004

MEMORANDUM FOR DIVISION CHIEFS, DoDDS-E
DISTRICT SUPERINTENDENTS, DoDDS-E
PRINCIPALS, DoDDS-E

SUBJECT: Standard Operating Procedures for Processing Requests for Emergency
Visitation Travel (EVT)

REFERENCE: JTR, Chapter 6, Part O, par. C6675-Emergency Visitation Travel (EVT).

- A) PURPOSE: To establish procedures for processing EVT requests.
- B) APPLICABILITY: This applies to all Department of Defense Dependents Schools-Europe employees and Authorizing Officials.
- C) POLICY:
1. It is DoDDS-Europe policy that Emergency Visitation Travel (EVT) be authorized by an appropriate Authorizing Official (AO) to allow eligible employees and/or eligible family member(s) to travel at Government expense to CONUS, non-foreign OCONUS area, or other location in certain situations of family emergency.
 - (a) EVT is not permitted for travel within the foreign area/country of assignment.
 - (b) Reimbursement is limited to the cost of transportation procured or that would have been procured through a CTO as required in par. C2203. Reimbursement is not authorized for transportation on a non-certificated (i.e., foreign flag) air carrier unless a U.S. flag air carrier is or was not available as indicated in par. C2204-C.
 - (c) Per diem, and excess baggage or unaccompanied baggage charges are not payable or reimbursable.
 2. Authorization of EVT under the provisions of JTR, Chapter 6, Part O, par. C6675 is dependent on verification of the family emergency by the American Red Cross. Employees away from the Permanent Duty Station (PDS) on leave or TDY in CONUS or non-foreign OCONUS are not eligible for EVT.
 3. EVT is authorized in circumstances involving:

- (a) A serious illness or injury of an immediate family member;
- (b) Death of an immediate family member;
- (c) Special family circumstances: travels to attend funeral services of a deceased person who has stood in the place of a parent, or to visit a seriously ill or injured person who stands in the place of a parent; or is the sole surviving member of the family of a seriously ill, injured, or deceased person.

D) DEFINITIONS:

Authorizing Official (AO)-The individual who controls the mission, authorizes the trip, and controls funds for TDY travel. (i.e. Division Chief, Superintendent, Principal).

Eligible Employee-An employee who is a US citizen assigned at an OCONUS foreign area/country PDS, and has a transportation agreement that provides for return travel to the employee's actual residence.

Eligible Family Member-The eligible employee's spouse, or children of the eligible employee and/or the spouse who are part of the employee's OCONUS household.

Immediate Family Member-The following relatives of the employee:

1. Spouse, and parents thereof;
2. Children, including adopted children and spouses thereof;
3. Parents;
4. Brothers and sisters, and spouses thereof; and
5. Any individual related by blood or affinity whose close association with the employee is the equivalent of a family relationship.

Serious Illness or Injury-An injury or illness from which, based on competent medical opinion, death is imminent or likely to occur, or an illness or injury during which the absence of the employee and/or eligible family members(s) would result in great personal hardship.

Allowable Transportation Expenses.

1. The transportation cost from the airport serving the employee's PDS (or applicable originating point) to the airport serving the destination authorized for EVT and return; and
2. Airport taxes and transportation between interim airports.

3. Per diem, and excess baggage or unaccompanied baggage charges are not payable or reimbursable.

E) PROCEDURES AND RESPONSIBILITIES:

1. Each employee must:

- (a) Notify the AO and/or submit an Emergency Leave request prior to the commencement of travel.
- (b) Ensure that a message to the immediate supervisor is received from the American Red Cross verifying the nature of the emergency. See Attachment 1 for additional information regarding Red Cross Emergency Services.
- (c) Include a written statement with each request. The statement must include, the name and address of the ailing family member and the attending physician or hospital and the name, address, and relationship of the person to be contacted in connection with the emergency.
- (d) Complete DD Form 1610 (Request and Authorization for TDY Travel of DoD Personnel) to request EVT Transportation.
- (e) Complete and sign a Repayment Agreement, (Attachment 2) authorizing the U.S. Government to deduct pay from an employee's salary, allowance, lump-sum leave payment or other payment in the event such travel is not approved or later determined to be invalid under the provisions of the JTR, par. C6676.
- (f) Prepare a statement, not more than 30 days after travel completion, when the employee travels to visit a seriously ill or injured family member prior to EVT authorization.

The statement must include the name, address, and relationship of the ailing family member, and a report from the attending physician or hospital describing the nature of the illness or injury. This statement is required prior to reimbursement of travel expenses.

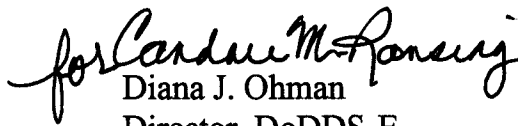
- (g) Properly request leave during his/her absence.

2. Each AO must:

- (a) Review employee statement and American Red Cross verification documentation to determine seriousness of the illness.

- (b) Ensure that employee/and or family member meet the eligibility requirements. (i.e. is the employee on a transportation agreement?).
- (c) Review and approve/disapprove each DD Form 1610 (Request and Authorization for TDY Travel of DoD Personnel). In preparing the DD1610 it is imperative that Pcode 7260, the ORC (of the school or DSO) and OC 2108 be used.
- (d) Ensure that employee completes and signs the Repayment Agreement.
- (e) Notify employees, in writing, of EVT authorization of reimbursement decision, to include reason if disapproved.

F) EFFECTIVE DATE: The effective date of this SOP is July 21, 2004.


Diana J. Ohman
Director, DoDDS-E

cc:
Deputy Director, DoDDS-E

Attachments:
As stated

ATTACHMENT 1

AMERICAN RED CROSS PROCEDURES

Authorization of Emergency Visitation Travel under the provisions of JTR, Chapter 6, Part O, par. C6675 is dependent on verification of the family emergency by the American Red Cross. The Red Cross sends messages quickly, anywhere in the world, and the information or verification in this message assists the employee's supervisor in making a decision regarding emergency leave.

General information regarding Red Cross Services may be found at:

<http://www.redcross.org/>

Specific information regarding Red Cross Emergency Verification Services may be found at:

http://www.redcross.org/services/afes/0,1082,0_321_,00.html

Procedures for Contacting the Red Cross to Send an Emergency Message:

Families of DoDDS employees residing in the United States can call the Red Cross Armed Forces Emergency Service Centers for help seven days a week, 24 hours a day, 365 days a year. The toll-free telephone number is available through local military installation operators and from local Red Cross offices and local Red Cross chapters.

Red Cross chapters are listed in local telephone books and on the American Red Cross Web site at <http://www.redcross.org/where/where.html>

DoDDS personnel in overseas areas should call installation operators or the on-base Red Cross offices.

When calling the Red Cross to arrange for the transmission of an emergency message to the supervisor, please have ready the following information, which will speed the process of sending the message:

- Employee's Full Name
- Supervisor's Name
- School/Office of Assignment
- Employee's Social Security Number
- Military Address
- Commercial Telephone Number

ATTACHMENT 2

REPAYMENT AGREEMENT

"I, _____, certify that I have read and understand
(Name)

the regulations applicable to emergency visitation travel(JTR,par.C6676), and I
hereby agree to repay _____
(Name of employing DoD component)

for expenditures made in connection with my emergency visitation travel (or
emergency visitation travel of my eligible dependent),

(Name of dependent) (Relationship)

in the event such travel is not approved or is subsequently determined to be invalid under
the provisions stated in JTR,par.C6676.

In the event of my failure to make such repayment when required, I hereby authorize
the deduction of such repayment from my current salary, allowances, lump-sum leave
payment, or other payment which may be or become due me from the U.S. Government."

(Signature) (Date) (Typed Name)

After execution of the above repayment agreement, the DoD component may procure
transportation through official channels.