



**DEPARTMENT OF THE AIR FORCE  
52D FIGHTER WING (USAF)**

Date: \_\_\_\_\_

MEMORANDUM FOR 52 FSS/FSPD

FROM: \_\_\_\_\_

SUBJECT: Consecutive Overseas Tour (COT), In Place Consecutive Overseas Tour (IPCOT) Request Letter, Overseas Tour Extension Incentive Program (OTEIP) Y3 Option

1. In order to have COT/IPCOT Orders produced, you must first provide the following documents below to the Military Personnel Section (MPS) no earlier than 30 duty days and no later than 14 duty days prior to departure date.

**Member's Responsibilities:**

- Complete the COT/IPCOT request letter; use ONLY if COT entitlement was deferred before arriving at Spangdahlem or you have entered an approved IPCOT extension.

- Request flight reservations/itinerary through TMO/SATO Passenger Travel Section at Bldg 103 Room 1, email: 52lrs.lgrdap.passengertravel@us.af.mil or call 06565-4866 if you have any questions. *(Completed by TMO/SATO)*

**Total Round Trip Cost to/from HOR in dollars including taxes:** \$\_\_\_\_\_ (per person)

**Total Cost to Destination:** \$\_\_\_\_\_ (per person) SATO Rep Signature: \_\_\_\_\_

- Bring completed COT/IPCOT/OTEIP package to the MPS; Package includes:

- Completed COT/IPCOT/OTEIP worksheet (This sheet)
- Copy of your PCS Orders that brought you to Spangdahlem, all amendments (if applicable), & all command sponsorship letters (if applicable)
- Copy of DD form 4/1 Enlistment/Reenlistment Document (Obtain a copy from PRDA or ARMS) (Enlisted only)
- Extended Active Duty Order (EADORD) depends on your commissioning source (Officer only)
- Paid Travel Voucher Summary showing charged leave (for COT only)
- IPCOT/OTEIP Approval notification RIP (for IPCOT/OTEIP only)
- LES
- Flight Itinerary

**\*\*\*MEMBER'S ACTION//PLEASE COMPLETE ALL SECTIONS\*\*\***

<b>TYPE OF LEAVE REQUEST:</b> COT/IPCOT/OTEIP Y3 (circle one)		<b>TODAY'S DATE:</b>
<b>RANK/NAME</b>		<b>SSN:</b>
<b>SQ/OFF SYM:</b>	<b>DUTY PHONE:</b>	<b>PROJ DEPART DATE:</b>
<b>DUTY TITLE:</b>	<b>DAS:</b>	<b>DOS:</b>
<b>LEAVE DATES:</b>	<b>HOME OF RECORD:</b> (CITY & STATE)-Verify from DD Form 4-Enlistment Contract:	
<b>LEAVE ADDRESS:</b>		
<b>EMERGENCY PHONE NUMBER:</b> (    )		

"The information herein is FOR OFFICIAL USE ONLY (FOUO) information which must be protected under the Freedom of Information Act (5 U.S.C 552) and/or the Privacy Act of 1974 (5 U.S.C. 552a). Unauthorized disclosure or misuse of this PERSONAL INFORMATION may result in disciplinary action, criminal and/or civil penalties."

<b>ADDITIONAL TRAVELERS (if applicable):</b>		
<b>NAME: (Last, First MI.)</b>	<b>DOB: (Children Only)_</b>	<b>PASSPORT NUMBER</b>

\*\*\*Be advised that COT/IPCOT entitlements are for the military member and their command sponsored dependents, at both locations (losing and gaining PDS) for COT and before the member enters an IPCOT. All airline tickets must be purchased through TMO/SATO and must be on a U.S. flag carrier. If you wish to self- procure your travel, please contact TMO/SATO, and provide the authorization along with the letter. **NOTE: DO NOT INPUT YOUR COT/IPCOT IN LEAVE WEB!** Your leave will be charged leave once you file your travel voucher with Finance upon return.

2. Complete this letter and return, along with the above required documents, as they pertain to your request to the MPS. Your orders will be emailed to you in NLT 10 duty days. For further questions/concerns, contact the MPS- Career Developmetn Section at 452-6817.

I've carefully read and understand the Overseas Returnee & CONUS Mandatory Mover Counseling Guide, dated February 2011

Supervisor Approve  /Disapprove

\_\_\_\_\_  
Member's Signature/Date

\_\_\_\_\_  
Supervisor's Signature/Date

**\*\*\*DO NOT WRITE BELOW THIS LINE- FOR MPS/FSMPS PERSONNEL USE ONLY\*\*\***

COT/IPCOT request letter and package was received on \_\_\_\_\_ ; CD Rep Initials: \_\_\_\_\_

Date e-mailed to Finance for certification: \_\_\_\_\_

Orders completion date/Emailed to Member: \_\_\_\_\_