

\ 77#@0h=\ u\ REQUEST FORM

****TO BE COMPLETED BY GROUP CC/DO/or SEL****

NAME: CC/DO/ or SEL

EMAIL:

PHONE:

MEMBER NAME:

E-MAIL:

PHONE:

JUSTIFICATION :

☐

**GENERAL
OFFICER**

☐

**GROUP/SQ CC
FIRST SGTS/**

☐

**SPECIAL DUTY
APPLICATION**

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OFFICIAL PASSPORT

AWARD WINNERS

(Packages leaving SAFB only)

OTHER

Must provide
justification and PA
approval

For full regulation on studio
photography please see AFI 35-101,
section 7.14.

For any additional questions please
contact 82trwpa@us.af.mil

NOTES:

By signing this form you attest that the
information contained in it is truthful and
that you have a legitimate mission need
for Public Affairs photo services. Anyone
found to be in violation will be referred
back to their First Sergeant. No-Shows
will be reported to their chain of command
and placed on a standby list.

MEMBER SIGNATURE

GROUP CC/DO/ or SEL SIGNATURE

FOR OFFICIAL PA USE ONLY

CAO 19 Dec 23