

## Army Community Service USAG Rheinland-Pfalz

ACS Unit Training / Support Request

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Title:	
Proposed Date(s):	
Start / End Times:	
Unit:	
Place of Brief:	
POC Name:	
POC Phone #:	
POC Email:	
Demographics: (Check All That Apply)	
E-1 – E-4	W-1 + CIVILIANS
E-5 – E-6	0-1 – 0-3
E-7 +	O-4 +
Number of Attendees:	
ADDITIONAL INFORMATION	
Is a live port, screen, and projector available? No.	
Requested ACS Program(s):	
FAMILY ADVOCACY PROGRAM (FAP) Please choose an option.	
FINANCIAL READIN	IESS PROGRAM (FRP) Please choose an option.
MOBILIZATION / DEPLOYMENT (MOB/DEP) Please choose an option.	
<b>RELOCATION READINESS PROGRAM (RELO)</b> <i>Please choose an option.</i>	
OTHER	
Send all requests to: usarmy.rheinland-pfalz.id-europe.mbx.garrison-acs@army.mil	

Mailbox cannot receive encrypted emails. If encryption is required please contact ACS directly for support. Due to low staffing, please request training/support at least 15 business days in advance for consideration. Thank you!