

Division of Commissioned Corps Personnel and Readiness (DCCPR) Retirement Checklist

<p>Application/Effecting Retirement:</p> <p>For more information, refer to Module 2-B.</p>	<p>1) Requesting Permission: Officers must have greater than 20 and less than 30 years active duty. A memorandum on Agency letterhead must be sent up the Chain of Command to receive permission to voluntarily retire. The request must be received by the Director, ACMB 90 days prior to the effective date of the retirement.</p> <p>2) Requesting Retirement: The officer completes the PHS-1373 "Separation of Commissioned Officer" and forwards it to their Agency Liaison in conjunction with the Request for Retirement Memo.</p>	<p>Date: _____</p>
<p>Travel and Transportation Allowances</p> <p>For more information refer to Module 6-A.</p>	<p>Contact the Agency/OPDIV travel representative and Shipping Officer for details related to the retirement move and the correct forms used for reimbursement. Currently, retiring officers are authorized one final move within the Continental United States (CONUS) that include(s):</p> <ul style="list-style-type: none"> a. Mileage b. Per Diem c. Shipment of Household Goods (HHG) d. 1 year of Non-Temporary Storage (NTS) at point of origin <ul style="list-style-type: none"> o Allowances include eligible dependents o All HHG not put into NTS may use 90 days of Temporary Storage at point of destination o Additional assistance and information is available here. Click Here. 	<p>Date: _____</p> <p>Date: _____</p> <p>Date: _____</p> <p>Date: _____</p>

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<p>Retirement Benefits</p>	<p>Upon retirement, officers may have the use of the following benefits:</p> <ul style="list-style-type: none"> a. Uniformed Medical Treatment Facilities (MTF). For more information, refer to Module 5-A. b. Enrollment in TRICARE (medical and dental) For more information, refer to Module 5-A. c. Medicare at age 65 (TRICARE for Life) For more information, refer to Module 5-A. d. Use of Military Facilities (Commissaries, Exchanges, Recreational Areas, etc.) For more information, Click Here. e. Space-A Travel For more information, Click Here. <p>It is the officer's responsibility to check and review all benefits offered after retirement.</p>	<p>Date: _____</p>
<p>Survivor Benefit Plan (SBP)</p> <p>For more information, refer to Module 4-A.</p>	<p>Plan provides annuity to spouse and dependents upon officer's death. Contact Separations Unit for enrollment form and information.</p> <ul style="list-style-type: none"> a. Complete and submit the required form with Survivor Benefit Plan election certification prior your date of retirement. CG 4700 	<p>Date: _____</p>
<p>Veterans Affairs Benefits (VA)</p>	<p>Review the following benefits from the VA:</p> <ul style="list-style-type: none"> a. VA Medical Benefits For more information, refer to Module 7-A. b. SGLI/VGLI For more information, refer to Module 7-B. c. Disability Compensation For more information, refer to Module 7-D. d. Education Assistance For more information, refer to Module 7-C. e. Home Loan Guarantee For more information, refer to Module 7-D. f. Death Benefits For more information, refer to Module 7-D. g. Dependency and Indemnity Compensation (DIC) For more information, refer to Module 7-D. h. Complete and submit Veterans Affairs Form 21-526EZ and submit to your local VA Office or online VA Form 21-526EZ 	<p>Date: _____</p>

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<p>Employment and Political Activity</p> <p>For more information, refer to Module 2-D.</p>	<p>Review the material concerning employment after retirement. Some restrictions apply when conflicts of interest are involved. Contact your agency ethics counselor for more details.</p>	<p>Date: _____</p>
<p>Assistance after Retirement</p>	<p>Designate an individual who will act as your personal representative in the event you become incapable on acting on your own behalf.</p>	<p>Date: _____</p>
<p>Social Security</p> <p>For more information, refer to Module 3-B</p>	<p>Contact the Social Security Administration for information concerning Social Security benefits. Information is available at http://www.sa.gov</p>	<p>Date: _____</p>
<p>Former Spouses' Protections Act (FSPA)</p> <p>For more information, refer to Module 4-A.</p>	<p>If a former spouse is involved, review the section concerning "Division of Retired Pay" for Commissioned Officers.</p>	<p>Date: _____</p>