



COLLECTIVE TRAINING CENTER

Facility Request Form



CAMP NAVAJO BLDG # 68
BELLEMONT, AZ 86015-6123

PHONE: (928)773-3155 FAX: (928) 773-3376 DSN: 853-3155
EMAIL REQUEST FORM TO: rolfe.c.feutz.mil@mail.mil

Complete entire Request Form: This Form MUST Arrive to the Training Support Branch NLT 180 days prior to your training dates

1. Unit Name / Date of Request:

Requesting Unit Today's Date

2. Requester Information:

Name Email
 Address City State Zip Code
 POC Number Cell Number FAX Number

3. Billeting Required: Yes No *If No Continue to Block 4*

	Enlisted (E1-E6)	Senior NCO (E7-E8)	Officer	Senior Officer
Male	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>
Female	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>

4. AZ ARNG- Certification Class: (If firing, does the person in charge have this?) ranges only

YES NO *If yes: enter name here*

5. Training Status:

Select Status (req)

6. Live Fire?

Yes No

Weapons	<input style="width: 100%;" type="text"/>
Systems	<input style="width: 100%;" type="text"/>

7. Facilities Requested:

Facility	Begin Date	End Date	Start Time	End Time	# of People	Training Event
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
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If more facilities are required use an additional form - Additional form used?

Yes No

Emergency Services

Total:
Total:

Commander's Authorizing Signature: _____

FOR USE BY TRAINING SUPPORT BRANCH ONLY

<input type="checkbox"/> Request Approved	<input type="checkbox"/> Request Denied	Authorizing Initials: <input style="width: 120px;" type="text"/>
<input type="checkbox"/> Reply Sent to Requestor	Date <input style="width: 150px;" type="text"/>	Method: <input style="width: 120px;" type="text"/>
<input type="checkbox"/> Site Chief	Date <input style="width: 150px;" type="text"/>	Method: <input style="width: 120px;" type="text"/>