Authorization For Disclosure of Information
To
Tragedy Assistance Program for Survivors

Release Authorization: I hereby authorize the United States Air Force, through its agents including my Casualty Assistance Representative and Headquarters Air Force Personnel Center, Casualty Services Branch, to release the personal information listed below to the Tragedy Assistance Program for Survivors (TAPS) to allow their representatives to contact those listed below to offer assistance in the form of peer mentorship, counseling and dedicated services. I understand this authorization may be revoked at any time, if requested in writing. If authorizing the release of personal information concerning a minor, I assert I am the named minor's parent or legal guardian.

Air Force Member's Name: _____

Rank:_____**Duty Station:**_____

Personal Information To Be Released: (attach continuation sheets as necessary).

Name	Relationship to AF Member	Age (if minor)

Address: _____

Primary Contact #:_____**Email:**_____

Please Initial One of the Below Options:

_____I consent to the disclosure of the personal information listed above to TAPS and for a representative of TAPS to contact me to offer condolences and to discuss their support to my family.

_____I **DO NOT** consent to the disclosure of my personal information and DO NOT wish to be contacted.

Use of the Personal Information: The personal information may only be used for the purpose of providing support services from the TAPS organization and may not be provided to any other organization for any reason. **ANY DISCLOSURE OF PERSONAL INFORMATION BY THE RECIPIENT(S) IS PROHIBITED EXCEPT WHEN IMPLICIT IN THE PURPOSES OF THIS DISCLOSURE.**

_____ _____
Signature of Person/Parent/Guardian Date

Privacy Notice

AUTHORITY: Title 10 USC 2771, Armed Forces-Accountability and Responsibility; 37 USC 555 and 556
PRINCIPLE PURPOSE: To obtain authority to release information above to any individual(s), organization(s) or members of Congress making an offer of support or condolences in the form of letters, gifts, grants, special offers, or financial relief
ROUTINE USES: To provide information to third parties offering condolences, victim relief or other offers resulting from the death of the Airman.
DISCLOSURE: Disclosure is voluntary. If the consent is not provided, information will not be released outside the Department of Defense.