	NO	NCOMBA		UATION OPER JSFJ FORM 178-R	ATION	S (NEO)	CARD		
Mark with an "X"	USAF		USN	USMC	С	oD Civilian	C	Other:	
SPONSOR'S NAME (Last, First, MI)			SPC	NSOR'S SEX	SPONSOR'S GRA		SPONSOR	SPONSOR'S SSN (Last 4)	
SPONSOR'S DEROS (DD Month YY)			SPONSOR'S DUTY TELEPHONE NUMBER			SPONSOR'S CONTACT TELEPHONE NUMBER			
SPONSOR'S UNIT		I			SP	ONSOR'S DU	JTY STATION (Za	ama, Yokota, A	tsugi)
NONCOMBATANT NAMES (Last, First, MI)		SEX	SSN	DATE OF BIRTH (YYYY MM DD)	СІТІ	ZENSHIP	RELATIONSHIP		PASSPORT NUMBER
NONCOMBATANT LOCAL	ADDRESS		NONG	COMBATANT MAILIN	G ADDRESS	;			
EMERGENCY CONTACT A	Γ DESINATION (Nan	ne, address, t	elephone number o	and/or email address,	)				
NAME, ADDRESS & TELEF	HONE NUMBER OF	PERSON WIT	H POWER OF ATTO	DRNEY (Only sole pare	ent/EEC or	dual military,	/EEC)		
NAME OF SCHOOL ATTEN	IDED BY CHILD – NO	TE: If child is	NOT DoD ENROLL	ED, please provide NA	AME, ADDF	ESS & TELEP	HONE NUMBER	R to school.	
	MAKE		MOD		L YEAR LICENSE				CENSE
AUTOMOBILE (If applicable)									
PETS (If applicable)	TYPE OF PET		GHT OF PET n pounds)	ADMIN USE ONLY					
(Name)									
(Name)									
MEDICAL NEEDS									
REMARKS (Non-combata	nt's email address):								
SPONSOR'S SIGNATURE						DATE (YYYY MM DD)			
PRIVACY ACT STATEMENT									
1. AUTHORITY: 1	itle 5, United St	ates Code	, Section 301; T	itle 10, United St	ates Cod	e, Section	3012; and E	Executive Or	rder 9397.
PRINCIPAL PU noncombatants			nmand in nonco	ombatant evacua	tion oper	ations by e	establishing a	a database	of potential
ROUTINE USE operations by ice			II provide comn	nanders with infor	mation to	assist in	their conting	ency planni	ng and
of information is	voluntary. The	re will be n	o adverse effec	EFFECT ON INDIct for not providing and operations.	_	-	-	-	