



Air Force Instructions for completing EFMP/OVERSEAS CLEARANCE FORMS:

- DD Form 2792, DD Form 2792-1, AF Form 1466 and AF Form 1466D (dental)

When all forms are complete, please return the form to the 517TRG/Medical office. All local & Goodfellow AFB correspondence will be handled by the Air Force Medical Staff. You will be referred to the Army EFMP office as applicable

The DD 2792, Family Member Medical Summary (all dependents regardless of age) - ***must be completed by a medical professional***

Notes for completion: Signatures required on page 1 and page 3 (Section 11)

- Make sure that the doctor completes the entire form, addressing all sections/pages; if something does not apply, ask that they indicate "N/A" on that portion, and move on.
- For the update/disenrollment, ask the doctor to address the specific medical condition that he/she was previously enrolled for.
- Page 3 – AFTER the doctor has completed the form, patient, or parent signs to certify that what the doctor has written is correct. This is done by completing block 11 (a-c).
- Page 4 - 11 – Only complete the boxes across the top of the page.
- Three Addendums (Pages 8, 9, & 11) – Each of these must be addressed with a "yes" or "no" at the top of the page. Ensure that further information/explanation is included as needed for all "yes" answers.
- Pages 7, 8, 10, & 11 – Ensure that the doctor signs and stamps at the end of each of these pages.

The DD 2792-1, Special Education/Early Intervention Summary (all children 3 years of age and older) - ***completed by a school representative***

Notes for completion: Signatures required on page 2 (Section 7), page 3 (section 1)

- Make sure that the form is completed in its entirety. If something does not apply, ask that the school representative indicate "N/A" on the respective portion and move on.
- Page 2 – Sponsor or spouse completes blocks 1-7. If the student is homeschooled, no further action is necessary, and the form is complete.
- Page 3 – Sponsor or spouse completes blocks 1 & 2. School representative completes remaining blocks (for the appropriate age group). Ensure that the school representative signs block 8.
- Attach a copy of the student's current IFSP, IEP, or 504 Plan.
- Pages 7, 8, 10, & 11 – Ensure that the doctor signs and stamps at the end of each of these pages.

The AF 1466, Request for Family Member's Medical & Educational Clearance for Travel

Notes for completion: Signatures required on page 1, page 2 (section II), and Initials on page 3 (Section V) w/ signature at bottom

- Ensure the form is fully completed by the ADSM. If unsure, leave blank and can be completed at EFMP appointment.
- Page 1 – Sponsor completes Sections at bottom of page.
- Page 2 – Sponsor completes Sections I and Section II (Sponsors Data & Signature)
- Page 3 – Sponsor completes Section IV and Section V (Initials and Signature)
- Page 4-5 - Only "Sponsor's Name and SSN" sections at top of page
- Pages 7, 8, 10, & 11 – Ensure that the doctor signs and stamps at the end of each of these pages.

The AF 1466D, Dental Health Summary (Everyone 2 years of age and older) - ***must be completed by a Dental Provider***

Notes for completion:

- Complete Section 1a only : name, sponsor SSN, Family Member prefix

Additional Forms:

1. DD 2870: Release of Information (as needed for civilian medical providers)
2. AF 4380: Special Needs Screener (Completed at MPF)

Marion V. Sanders, Capt, USAF
EFMP Medical Review Officer
Phone: 831.242.5026

Family Member Prefix:
 30 = First Marriage Spouse
 31 = Second Marriage Spouse
 32 = Third Marriage Spouse
 ETC...

01 = First Enrolled Dependent
02 = Second Enrolled Dependent
 ETC...

Information is available from DEERS office: 831.242.5949