

Scheduling Request Alpena CRTC

This form becomes FOUO when filled in.

Completion of this form does not guarantee reservations. MICRTC Scheduling will contact the Primary POC once this form is received. Requests for facilities and billeting will be arranged once this form is approved.

Military units requiring any Munitions assets must accomplish an Allocation Transfer Request (ATR) a minimum of 90 days prior to arrival

Section I: General Information

Type Of Deployment	Other	Branch Of Service	Lead Unit Name	Organizational Mailing Address
Primary Point of Contact:		DSN or PH#	Alternate POC:	DSN or PH#
EMAIL:			EMAIL:	

Section II: Date Of Deployments

Section III. Deploying Aircraft? Total Number

Advon Arrival Date	Main Body Arrival Date	Main Body Departure Date	Type	Number
Rear Departure Date	Number Of Advon Personal	Number Of Main Body Personal	Type	Number

Section IV: Logistics And Billeting (CRTC Accepts Approximate Numbers At This Time)

Section V: Special Conditions

Main Body	<p>Please read and check the box indicating Fire and Security Forces requirements in regards to aircraft. Failure to check box may result in disapproval on unit's request.</p> <p>Fire Protection: Units deploying with 8 or more aircraft, must coordinate additional fire support with MICRTC/CEF.</p> <p>Security Notice: Security checks can be provided for deployed aircraft located on the CRTC flight line, however, it does not meet the requirements within AFI 31-101. Contact MICRTC/SF for details.</p> <p><input type="checkbox"/> I have read and understand the above conditions</p>	
Number Of Males		Number Of Females
Total Number Of Personnel		
Will Your Unit Operate The Dining Facility		Will Munitions Be Needed
Will Your Unit Use The River Club		If Yes A Minimum Of 90
Will Your Unit Use Government Vehicles	Day Notice Will Be Needed	

Section VI: Remarks

Additional Comments / Training areas requested, or proposed daily schedule attached. (VERY IMPORTANT)!

Section VII:

CRTC Scheduling Officers Signature Block

CRTC Scheduling Officer Signature	Approve <input type="checkbox"/>	Disapprove <input type="checkbox"/>
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Scheduling Comments:

For area specific requirements, military units can visit our COP at: <https://afkm.wpafb.af.mil/ASPs/CoP/OpenCoP.asp?Filter=AN-OP-00-98>

Please Fill Form Out Save To Your Hard Drive And Then E-mail it To mi.crtc.scheduling@ang.af.mil

Print Form