



DEPARTMENT OF THE ARMY  
HEADQUARTERS, U. S. ARMY EUROPE REGIONAL MEDICAL COMMAND  
CMR 442  
APO AE 09042

REPLY TO  
ATTENTION OF

MCEU-O

2 January 2003

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: ERM Command Policy Letter 21, To Enhance the DOD Foreign Clearance Guide for Submission of Country and Theater Clearances

1. Purpose: To establish Standard Operating Procedures for requesting and tracking theater and country clearances within the USAREUR Area Of Responsibility. Intent is to identify, coordinate and document all medical missions and personnel originating outside the USAREUR AOR or moving from Germany to other countries within the USAREUR AOR.

2. Procedures.

a. Requests for Theater Clearance. All Medical Treatment Facilities within ERM Command will submit theater clearance requests for all military or civilian personnel from outside the USAREUR AOR with the sole purpose of visiting the MTF.

(1) Timeline. Normal requests require 30 days lead-time and a short notice request requires a minimum of 10 working days to process and must be stated in the subject line as "short notice" request.

(2) Responsibilities.

(a) MTF Operations Officers. Complete USAREUR Theater Clearance Request form and return by e-mail to [countryclearance@hbg.amedd.army.mil](mailto:countryclearance@hbg.amedd.army.mil).

(b) ACSOPS, ERM Command.

(i) Validate and document Theater Clearance Request forms.

(ii) Process Theater Clearance Requests.

(iii) Return approved clearance requests to requesting MTFs.

(iv) Provide weekly update to Commander, ERM Command on missions involving personnel visiting MTFs within the ERM Command AOR.

b. Requests for Country Clearance. All Medical Treatment Facilities within ERM Command will submit USAREUR Country Clearance requests for any personnel leaving Germany to any country within the USAREUR AOR.

MCEU-O

SUBJECT: ERM Command Policy Letter 22, To Enhance the DOD Foreign Clearance Guide for Submission of Country and Theater Clearances

(1) Timeline.

(a) Requests for Bosnia and Kosovo require a minimum of 12 working days from receipt of country clearance request by ERM ACSOPS to the intended date of travel.

(b) Travel to other countries including Kuwait and Qatar generally requires 45 days lead-time.

(2) Responsibilities.

(a) MTF Operations Officers. Complete USAREUR Country Clearance Request form and e-mail to [countryclearance@hbg.amedd.army.mil](mailto:countryclearance@hbg.amedd.army.mil).

(b) ACSOPS, ERM.

(i) Validate and document Country Clearance Request forms.

(ii) Process Country Clearance Requests through ODCSOPS, USAREUR.

(iii) Notify requesting MTFs on status of processed requests. (MTFs may check status of their own requests through <https://www.odscops.hqusareur.army.mil>, under "Services/Forms", "Country Clearances", then "Review Status").

(iv) Provide weekly update to Commander, ERM on missions involving medical personnel leaving Central Region for other areas within the ERM AOR.

3. The proponent for this policy is ERM ACSOPS at DSN 371-3362.



ELDER GRANGER  
Brigadier General, USA  
Commanding

DISTRIBUTION:

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**OFFICE OF THE COMMAND SURGEON, USAREUR  
COUNTRY CLEARANCE AND THEATER CLEARANCE REQUESTS**

All medical requests for Country Clearances and Theater Clearances must go thru HQ, USAREUR, Office of the Command Surgeon for validation of mission.

Assure the mission is valid and the requesting unit has contacted Current Operations, OCSURG. Once you have submitted this request to [country.clearance@hbg.amedd.army.mil](mailto:country.clearance@hbg.amedd.army.mil), it will be validated, an email of your USAREUR tracking number will be sent to you. You can track it on the <https://www.odcsops.hqusareur.army.mil/> website under "Country Clearance Request," click "review status," enter the tracking number, and click enter.

**DO NOT input on this website. You can use the website for information but do not submit the request on this website, it will not be validated and will not be processed.**

**Place all responses in RED.**

Please submit this memorandum to [country.clearance@hbg.amedd.army.mil](mailto:country.clearance@hbg.amedd.army.mil)

**30 days are required to process country clearance requests (KFOR/SFOR require 12 working days). Do not plan for any clearance to be validated if you do not meet the suspense.**

**PART 1**

1. COUNTRY:
2. NUMBER OF VISITORS:
3. START DATE:
4. END DATE:

**PART 2**

1. IF SUBMISSION IS LESS THAN 30 DAYS or LESS THAN 12 WORKING DAYS FOR KFOR/SFOR, A DETAILED REASON FOR WHY THE SUSPENSE WAS NOT MET IS REQUIRED.

**PART 3 REQUESTING UNIT INFORMATION**

1. UNIT POC (FULL NAME AND RANK):
2. UNIT POC EMAIL ADDRESS:
3. DSN PHONE NUMBER: COMMERCIAL NUMBER:
4. FAX NUMBER: FAX COMMERCIAL NUMBER:
5. UNIT REQUESTING COUNTRY CLEARANCE:
6. UNIT HEADQUARTERS:
7. UNIT LOCATION (CITY, STATE, COUNTRY):

**PART 4: UNIT OR FACILITY TO BE VISITED**

1. WHO ARE YOU VISITING (UNIT POC) FULL NAME AND RANK:
2. UNIT POC EMAIL ADDRESS:
3. DSN PHONE NUMBER: COMMERCIAL NUMBER:
4. DSN FAX NUMBER: COMMERCIAL NUMBER:
5. NAME OF UNIT OR FACILITY TO BE VISITED:
6. LOCATION:
7. PURPOSE OF VISIT (BE SPECIFIC):
8. TYPE OF VISIT:
9. LEVEL OF CLASSIFIED MATERIAL (SELECT ONE) [NOT REQUIRED]  
[SECRET] [TOP SECRET] [NOFORM]
10. MODE OF TRAVEL TO DESTINATION (EXAMPLE commercial air):
11. MODE OF TRAVEL AT DESTINATION (EXAMPLE military vehicle):

**PART 5: LOGISTICS AND ADMINISTRATIVE SUPPORT**

1. UNIT AWARE OF YOUR VISIT: YES NO
2. LODGING PROVIDED: YES NO
3. MESS PROVIDED: YES NO
4. IF NO TO ANY OF THE ABOVE, STATE HOW LOGISTICS AND ADMIN  
REQUIREMENTS WILL BE MET: (EXAMPLE: All lodging and mess are taken  
care of on the TDY orders, hotel reservations are made):
5. ALTERNATE DATES

START DATE:

END DATE:

**PART 6: VISITOR (Copy this portion for each visitor)**

1. LAST NAME:
2. FIRST NAME:
3. MI:
4. RANK:
5. SSN:
6. CLEARANCE:
7. US CITIZEN [YES] [NO]
8. UNIT OF ASSIGNMENT:
9. AT/FP TRAINING DATE AND LOCATION:
10. WEAPONS REQUIRED [YES] [NO] IF YES, WEAPONS QUALIFICATION  
DATE: \_\_\_\_\_
11. CURRENT DUTY POSITION:

**PART 7: PASSPORT DATA (NOT NEEDED FOR BOSNIA, HUNGARY,  
MACEDONIA OR KOSOVO)**

1. PLACE OF BIRTH:

2. DATE OF BIRTH:

3. PASSPORT #:

4. ISSUE LOCATION:

5. ISSUE DATE:

6. EXPIRATION DATE:

7. TYPE OF PASSPORT: [US TOURIST] [US OFFICIAL] [US DIPLOMATIC]  
[FOREIGN NATIONAL] [MILITARY ID/ORDERS]

8. VISITOR'S EMAIL ADDRESS: (VERY IMPORTANT FOR US TO EMAIL YOU  
THE APPROVAL)