

SAMPLE CERTIFICATION OF INCAPACITATED PARENT STATEMENT

DATE

From: Employee Name, Command
To: Command

Subj: CERTIFICATION OF INCAPACITATED PARENT STATEMENT

Ref: (a) JTR Vol. 2, Chapter 7, Part M

1. I certify that it is necessary for me (or for my spouse) to travel to the location of my (or eligible spouse's) parent to assist in getting appropriate care or making new living arrangements due to recently discovered incapacity, and may not be able to continue living independently. This request is consistent with the requirements in paragraph C7632, reference (a).

Name of Parent:

Residence of Parent:

Nature of Incapacity:

Detailed Description of the Circumstances:

2. I hereby declare that if approved, this will be

Please choose one:

- My (Employee)
 My Spouse's

Please choose one:

- First Trip
 Second Trip

at government expense during my or my spouse's lifetime as indicated above.

Employee's printed Name & Signature

DATE