FSH TM AR TM NG TM

FORT SAM HOUSTON CASUALTY ASSISTANCE CENTER (CAC) MEMORIAL AFFAIRS MILITARY FUNERAL HONORS SCHEDULING

Monday - Friday 7:15 a.m. – 4:00 p.m., Closed on Saturday, Sunday, National and Federal Holidays MILITARY FUNERAL HONORS REQUEST FORM (ARMY)

CEMETERY LOCATION Name of CEMETERY	CITY/COUNTY (SERVICE)	FUNERAL HOME		
NAME OF DECEDENT LAST FIRST ML. RANK SSN SERVICE ARMY STATUS: ACTIVE DUTY RETIRED VETERAN CELSSON/FULL FULL 2 MAN FULL CREMATION 2 MAN CREMATION (E-9 and above) (All Ranks) All Veteran Ranks Same criteria as Caisson Same criteria as 2Man add/or Full NOTE: (All Active Puty Soldiers and 120-Day REFRAD Army Veterans who die due to wounds received in OEF) I HAVE BEEN BRIEFED ON THE TYPE OF MILITARY HONORS MY LOVED ONE IS ELIGIBLE. I UNDERSTAND THE ELIGIBILITY CRITERIA AND RENDER THE FOLLOWING DECISION: I concur with the eligibility criteria that my loved one is authorized and desire to have the above honors so rendered. (PNOK Initials) Even though, I know my loved one is eligible for the above military honors; I wish to downgrade or limit the military honors rendered to This is according to my wishes. (PNOK Initials) PRIMARY NEXT OF KIN SIGNATURE (PNOK): PAPERWORK NEEDED FROM THE FUNERAL DIRECTOR (FD) OR NEXT OF KIN (NOK) 1. A COPY OF THE DD FORM 214 OR STATEMENT OF DISCHARGE 2. COMPLETE ADDRESS TO THE CEMETERY WITH MAP AND DRIVING DRECTIONS 3. FAX THIS FORM AND OTHER REQUIRED DOCUMENTS TO: FAX (210) 221-1748, OFFICE PHONE (210) 221-1780 (Mon-Fri 7:15am – 4:00pm) FUNERAL DIRECTOR OR FAMILY MEMBER NAME CONTACT PHONE	SERVICE DATE	INTERMENT TIME		
RANK SSN SERVICE ARMY STATUS: ACTIVE DUTY RETIRED VETERAN Same criteria as Caisson Same criteria as 2 Man CREMATION (Active/Retired) (Active/				
RANK SSN SERVICE ARMY STATUS: ACTIVE DUTY RETIRED VETERAN SERVICE ARMY CAISSON/FULL FULL 2 MAN FULL CREMATION 2 MAN CREMATION (E-9 and above) (All Ranks) All Veteran Ranks Same criteria as Caisson Same criteria as 2Man (Active/Retired)* (Active	STREET ADDRESS, CITY, ZIP CODE			
STATUS: ACTIVE DUTY RETIRED FULL VETERAN CAISSON/FULL FULL 2 MAN FILTED VETERAN CAISSON/FULL OLD WAN ACTIVE POLL ALL VETERAN Same criteria as Caisson Same criteria as 2Man CREMATION ACTIVE/Retired)* (Active/Retired)* All Veteran Ranks And/or Full and/or Full Active/Retired)* (Active/Retired)* (Active/Retired) And/or Full and/or Full And Render the Following Decision: I have been briefed on the type of military honors My Loved one is eligible. I understand the eligibility criteria and render the Following Decision: I concur with the eligibility criteria that my loved one is authorized and desire to have the above honors so rendered. (PNOK Initials) Even though, I know my loved one is eligible for the above military honors; I wish to downgrade or limit the military honors rendered to This is according to my wishes. (PNOK Initials) PRIMARY NEXT OF KIN SIGNATURE (PNOK): PAPERWORK NEEDED FROM THE FUNERAL DIRECTOR (FD) OR NEXT OF KIN (NOK) 1. A COPY OF THE DD FORM 214 OR STATEMENT OF DISCHARGE 2. COMPLETE ADDRESS TO THE CEMETERY WITH MAP AND DRIVING DRECTIONS 3. FAX THIS FORM AND OTHER REQUIRED DOCUMENTS TO: FAX (210) 221-1748, OFFICE PHONE (210) 221-1780 (Mon-Fri 7:15am - 4:00pm) FUNERAL DIRECTOR OR FAMILY MEMBER NAME CONTACT PHONE	NAME OF DECEDENT	7.10% EIDOS	· · · · · · · · · · · · · · · · · · ·	
STATUS: ACTIVE DUTY RETIRED VETERAN CAISSON/FULL FULL 2 MAN FULL CREMATION 2 MAN CREMATION (E-9 and above) (All Ranks) All Veteran Ranks Same criteria as Caisson Same criteria as 2Man (Active/Retired)* (Active/Retired)* (Active/Retired) Additive Duty Soldiers and 120-Day REFRAD Army Veterans who die due to wounds received in OEF) I HAVE BEEN BRIEFED ON THE TYPE OF MILITARY HONORS MY LOVED ONE IS ELIGIBLE. I UNDERSTAND THE ELIGIBILITY CRITERIA AND RENDER THE FOLLOWING DECISION: I concur with the eligibility criteria that my loved one is authorized and desire to have the above honors so rendered. (PNOK Initials) Even though, I know my loved one is eligible for the above military honors; I wish to downgrade or limit the military honors rendered to This is according to my wishes. (PNOK Initials) PRIMARY NEXT OF KIN SIGNATURE (PNOK): PAPERWORK NEEDED FROM THE FUNERAL DIRECTOR (FD) OR NEXT OF KIN (NOK) 1. A COPY OF THE DD FORM 214 OR STATEMENT OF DISCHARGE 2. COMPLETE ADDRESS TO THE CEMETERY WITH MAP AND DRIVING DRECTIONS 3. FAX THIS FORM AND OTHER REQUIRED DOCUMENTS TO: FAX (210) 221-1748, OFFICE PHONE (210) 221-1780 (Mon-Fri 7:15am – 4:00pm) FUNERAL DIRECTOR OR FAMILY MEMBER NAME CONTACT PHONE				
CAISSON/FULL FULL 2 MAN FULL CREMATION 2 MAN CREMATION All Veteran Ranks Same criteria as Caisson Same criteria as 2Man (Active/Retired)* (Active/Retired) All Veteran Ranks Same criteria as Caisson Same criteria as 2Man (Active/Retired)* (Active/Retired) All Active Duty Soldiers and 120-Day REFRAD Army Veterans who die due to wounds received in OEF) I have BEEN BRIEFED ON THE TYPE OF MILITARY HONORS MY LOVED ONE IS ELIGIBLE. I UNDERSTAND THE ELIGIBILITY CRITERIA AND RENDER THE FOLLOWING DECISION: I concur with the eligibility criteria that my loved one is authorized and desire to have the above honors so rendered. (PNOK Initials) Even though, I know my loved one is eligible for the above military honors; I wish to downgrade or limit the military honors rendered to This is according to my wishes. (PNOK Initials) PRIMARY NEXT OF KIN SIGNATURE (PNOK): PAPERWORK NEEDED FROM THE FUNERAL DIRECTOR (FD) OR NEXT OF KIN (NOK) 1. A COPY OF THE DD FORM 214 OR STATEMENT OF DISCHARGE 2. COMPLETE ADDRESS TO THE CEMETERY WITH MAP AND DRIVING DRECTIONS 3. FAX THIS FORM AND OTHER REQUIRED DOCUMENTS TO: FAX (210) 221-1748, OFFICE PHONE (210) 221-1780 (Mon-Fri 7:15am – 4:00pm) FUNERAL DIRECTOR OR FAMILY MEMBER NAME CONTACT PHONE	RANK	SSN	SERVICE ARMY	
(E-9 and above) (All Ranks) All Veteran Ranks Same criteria as Caisson Same criteria as 2Man (Active/Retired)* (Active/Retired) and/or Full *NOTE: (All Active Duty Soldiers and 120-Day REFRAD Army Veterans who die due to wounds received in OEF) I HAVE BEEN BRIEFED ON THE TYPE OF MILITARY HONORS MY LOVED ONE IS ELIGIBLE. I UNDERSTAND THE ELIGIBILITY CRITERIA AND RENDER THE FOLLOWING DECISION: I concur with the eligibility criteria that my loved one is authorized and desire to have the above honors so rendered (PNOK Initials) Even though, I know my loved one is eligible for the above military honors; I wish to downgrade or limit the military honors rendered to This is according to my wishes (PNOK Initials) PRIMARY NEXT OF KIN SIGNATURE (PNOK): PAPERWORK NEEDED FROM THE FUNERAL DIRECTOR (FD) OR NEXT OF KIN (NOK) 1. A COPY OF THE DD FORM 214 OR STATEMENT OF DISCHARGE 2. COMPLETE ADDRESS TO THE CEMETERY WITH MAP AND DRIVING DRECTIONS 3. FAX THIS FORM AND OTHER REQUIRED DOCUMENTS TO: FAX (210) 221-1748, OFFICE PHONE (210) 221-1780 (Mon-Fri 7:15am – 4:00pm) FUNERAL DIRECTOR OR FAMILY MEMBER NAME CONTACT PHONE	STATUS: ACTIVE DUTY	RETIRED	VETERAN	
I HAVE BEEN BRIEFED ON THE TYPE OF MILITARY HONORS MY LOVED ONE IS ELIGIBLE. I UNDERSTAND THE ELIGIBILITY CRITERIA AND RENDER THE FOLLOWING DECISION: I concur with the eligibility criteria that my loved one is authorized and desire to have the above honors so rendered (PNOK Initials) Even though, I know my loved one is eligible for the above military honors; I wish to downgrade or limit the military honors rendered to This is according to my wishes (PNOK Initials) PRIMARY NEXT OF KIN SIGNATURE (PNOK): PAPERWORK NEEDED FROM THE FUNERAL DIRECTOR (FD) OR NEXT OF KIN (NOK) 1. A COPY OF THE DD FORM 214 OR STATEMENT OF DISCHARGE 2. COMPLETE ADDRESS TO THE CEMETERY WITH MAP AND DRIVING DRECTIONS 3. FAX THIS FORM AND OTHER REQUIRED DOCUMENTS TO: FAX (210) 221-1748, OFFICE PHONE (210) 221-1780 (Mon-Fri 7:15am – 4:00pm) FUNERAL DIRECTOR OR FAMILY MEMBER NAME CONTACT PHONE	(E-9 and above) (All Ranks) (Active/Retired)* (Active/Retired)	All Veteran Ranks Same criteria as Cai and/or Full	isson Same criteria as 2Man	
FOLLOWING DECISION: I concur with the eligibility criteria that my loved one is authorized and desire to have the above honors so rendered (PNOK Initials) Even though, I know my loved one is eligible for the above military honors; I wish to downgrade or limit the military honors rendered to This is according to my wishes (PNOK Initials) PRIMARY NEXT OF KIN SIGNATURE (PNOK): PAPERWORK NEEDED FROM THE FUNERAL DIRECTOR (FD) OR NEXT OF KIN (NOK) 1. A COPY OF THE DD FORM 214 OR STATEMENT OF DISCHARGE 2. COMPLETE ADDRESS TO THE CEMETERY WITH MAP AND DRIVING DRECTIONS 3. FAX THIS FORM AND OTHER REQUIRED DOCUMENTS TO: FAX (210) 221-1748, OFFICE PHONE (210) 221-1780 (Mon-Fri 7:15am – 4:00pm) FUNERAL DIRECTOR OR FAMILY MEMBER NAME CONTACT PHONE	*Note: (All Active Duty Soldiers and 120-Day REFRAD Army Veterans who die due to wounds received in OEF)			
Even though, I know my loved one is eligible for the above military honors; I wish to downgrade or limit the military honors rendered to				
PRIMARY NEXT OF KIN SIGNATURE (PNOK): PAPERWORK NEEDED FROM THE FUNERAL DIRECTOR (FD) OR NEXT OF KIN (NOK) 1. A COPY OF THE DD FORM 214 OR STATEMENT OF DISCHARGE 2. COMPLETE ADDRESS TO THE CEMETERY WITH MAP AND DRIVING DRECTIONS 3. FAX THIS FORM AND OTHER REQUIRED DOCUMENTS TO: FAX (210) 221-1748, OFFICE PHONE (210) 221-1780 (Mon-Fri 7:15am – 4:00pm) FUNERAL DIRECTOR OR FAMILY MEMBER NAME CONTACT PHONE	I concur with the eligibility criteria that my loved one is authorized and desire to have the above honors so rendered (PNOK Initials)			
PAPERWORK NEEDED FROM THE FUNERAL DIRECTOR (FD) OR NEXT OF KIN (NOK) 1. A COPY OF THE DD FORM 214 OR STATEMENT OF DISCHARGE 2. COMPLETE ADDRESS TO THE CEMETERY WITH MAP AND DRIVING DRECTIONS 3. FAX THIS FORM AND OTHER REQUIRED DOCUMENTS TO: FAX (210) 221-1748, OFFICE PHONE (210) 221-1780 (Mon-Fri 7:15am – 4:00pm) FUNERAL DIRECTOR OR FAMILY MEMBER NAME CONTACT PHONE				
1. A COPY OF THE DD FORM 214 OR STATEMENT OF DISCHARGE 2. COMPLETE ADDRESS TO THE CEMETERY WITH MAP AND DRIVING DRECTIONS 3. FAX THIS FORM AND OTHER REQUIRED DOCUMENTS TO: FAX (210) 221-1748, OFFICE PHONE (210) 221-1780 (Mon-Fri 7:15am – 4:00pm) FUNERAL DIRECTOR OR FAMILY MEMBER NAME CONTACT PHONE	PRIMARY NEXT OF KIN SIGNATURE (PNOK):			
2. COMPLETE ADDRESS TO THE CEMETERY WITH MAP AND DRIVING DRECTIONS 3. FAX THIS FORM AND OTHER REQUIRED DOCUMENTS TO: FAX (210) 221-1748, OFFICE PHONE (210) 221-1780 (Mon-Fri 7:15am – 4:00pm) FUNERAL DIRECTOR OR FAMILY MEMBER NAME CONTACT PHONE	PAPERWORK NEEDED FROM THE FUNERAL DIRECTOR (FD) OR NEXT OF KIN (NOK)			
CONTACT PHONE	 COMPLETE ADDRESS TO THE CEMETERY WITH MAP AND DRIVING DRECTIONS FAX THIS FORM AND OTHER REQUIRED DOCUMENTS TO: 			
CONTACT PHONE	FUNERAL DIRECTOR OR FAMILY MEMBER NAME			
EMAIL ADDRESS				

**** **NOTE** ****

ALL HONORS REQUESTS MUST BE RECEIVED 48 HOURS PRIOR TO THE SCHEDULED INTERMENT. REQUESTS FOR MONDAY AND HOLIDAY FUNERALS MUST BE RECEIVED NOT LATER THAN FRIDAY AT 1 P.M. REQUESTS AFTER 1 P.M. CANNOT BE HONORED AND THERE IS NO SCHEDULING ON WEEKENDS

Last updated: 15 JANUARY 2015

INSTRUCTIONS TO COMPLETE THE MILITARY FUNERAL HONORS (MFH) SCHEDULING FORM (MFH SCHEDULING FORM, dated 15 January 2015)

CITY/COUNTY: The City and County where the final interment and graveside service will take place. We need to make sure the location is within the Fort Sam Houston Casualty Assistance Center (CAC) Region before we can assign a MFH Team to support the request.

FUNERAL HOME: Name of Funeral Home that is responsible for the interment.

SERVICE DATE: The date that the interment and graveside service will take place.

INTERMENT TIME: Show time of Funeral Party at the graveside service. The MFH Team is to be in place 15 minutes prior to show time of funeral procession. A MFH Team arrives to render honors and does not remain for the duration of the service and this includes any MFH missions done at chapels or church facilities. Once honors are completed the team leaves the premises.

CEMETERY LOCATION: Full name of cemetery, street address, city and zip code where interment will take place.

NAME OF DECEDENT: In capital letters, please **PRINT** legibly the Last Name, First Name and Middle Initial of the deceased Soldier.

RANK: Please list the last known highest rank of the deceased.

SSN: Please list the full Social Security Number of the deceased (Request Form is destroyed upon completion of mission). We use the SSN to validate what is in our database.

SERVICE: Army (Fort Sam Houston MFH Section conducts Army Honors only... exceptions may be granted by Army Support Activity and the CAC depending on circumstances).

STATUS:

Active Duty – Active Duty Soldiers receive Full Honors and Full Honors Caisson if interred at Fort Sam Houston National Cemetery (FSHNC).

Retiree – Retirees receive Full Honors and Full Honors Caisson if interred at FSHNC and in the rank of Command Sergeant Major/Sergeant Major (E-9) or above.

Veteran – Non-Retired Veterans with an other than Dishonorable Discharge will receive a Flag Presentation consisting of a 2-Soldier Team that will fold and present the flag as well as operate the digital bugle or sound system for TAPS.

TYPES OF HONORS REQUESTED:

Full Honors Caisson (FHC) – All FHC missions are held at FSHNC. Highest priority goes to all Active Duty Soldiers. Next, priority goes to all Retirees in the rank of Command Sergeant Major/Sergeant Major and above. Active Duty Soldiers have higher priority over Retirees.

Full Honors (FH) – All ranks (Active Duty Soldiers or Retirees). Conducted in totality of CAC Region (58 counties of South Central Texas). If the deceased is cremated, please check the block for Full Honors Cremations.

2-Man Standard Honors (SH) – All Veterans (Retired or Non-Retired) throughout CAC Region. This consists of a Two-Soldier MFH Team. If the deceased is cremated, please check the block for 2-Man Standard Honors Cremations.

ELIGIBILITY: Please have the next of kin (NOK) family member responsible for the interment to initial the statement that they CONCUR with the type honors that he or she has requested in behalf of their deceased Service Member. The NOK family member may wish to downgrade the MFH that the decedent qualifies for and should initial that statement to do so. Funeral Directors should make every effort to have the family member initial these statements. The CAC will make sure the family understands that if anyone other than the family initials those statements that the Funeral Home will be held responsible and not the CAC.

SIGNATURE: Primary next of kin or the person responsible for disposition of the remains should sign legibly for the CAC's review. If family member or representative of family responsible for the interment is not available, the funeral home may choose to sign in behalf of the family just as long as they provide a signed written Memorandum of Record separate from the request stating why they could not get the family member's initials or signature.

REQUIRED PAPERWORK:

- 1- Please provide a DD Form 214 Discharge Certificate that shows decedent was other than dishonorably discharged (General under Honorable Conditions and Honorable Discharges).
- 2- Please provide complete address and map to interment location to include driving directions from Fort Sam Houston if interment is other than FSHNC. This effort ensures the MFH Team knows exactly where to report and who the point of contact will be.
- 3- Please fax the MFH Scheduling Form with the supporting documentation to **210-221-1748** as early as possible. This information should be sent to the CAC at least 48 hours prior to the interment.

FUNERAL DIRECTOR CONTACT INFORMATION: The CAC needs the Full Name of the Funeral Director responsible for the service, the office and cell contact numbers, and the FD's email address to ensure any ongoing coordination that may be necessary. The CAC passes this contact information to the assigned MFH Teams.

ADDITIONAL INFORMATION: All Funeral Directors must communicate to their customers that the make-up of MFH Teams is the Army's responsibility and that the Teams reflect the diversity of today's Army ranks. The CAC cannot honor MFH Scheduling Forms that make specific requests regarding the make-up of the Team by gender, race, ethnicity, or faith since that is discriminatory in nature and the Army will not be complicit in that practice.

The CAC is closed on weekends. The 24-hour operations mandate is strictly for Casualty Reporting purposes. There is no 24-hour scheduling for MFH. If a Funeral Director submits a request on Saturday for a funeral on Monday. The likelihood of getting that mission scheduled is very slim. On a 4-Day Weekend where Monday is a Holiday and the mission is on Tuesday, any MFH forms faxed to the CAC on the weekend may not be seen until that Tuesday morning. The CAC recommends in such cases as 3 or 4-Day Weekends where Funeral Directors faxed request forms on Saturday or Sunday that Funeral Directors inform families of the likelihood of obtaining honors on such short-notice will be highly unlikely.