DAA FORM 56-26 U.S. DEPARTMENT OF COMMERCE NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION		,		
NOAA CORPS T	RAVEL INFORM	ATION		
		STRUCTIONS		
USE THIS FORM FOR PART I (PCS ORDERS); AND NEXT PAGE FOR PART II (TERMINAL TRAVEL ORDERS), OR PART III (INITIAL APPOINTMENT TO THE OFFICER TRAINING CENTER).				
After completing appropriate part of this form, send promptly though commanding officer (supervisor) and Marine Center (or other director) to CPC1.				
Orders are prepared IAW JFTR Volume #1.				
If you have questions concerning completion of this form, please call area code 301-713-3453 or 800-224-6622 for help.				
REMEMBER: Your orders cannot be prepared until this questionnaire is returned.				
	PAR	F I PCS ORDERS		
To: COMMISSIONED PERSONNEL CENTER, CPC, SILVER SPRING, MD 20910 THRU				
VIA				
NAME (last-first-middle initial) SOCIAL SECURITY NUMBER		GRADE		
PRESENT OFFICIAL DUTY STATION (Show City and State only except ships, show ship, homeport and point of debarkation)			PRESENT ROUTING CODE	
TRAVEL METHOD (Check as appropriate) PRIVATE VEHICLE AIR TRAIN OTHER (Specify)				
TRAVEL DATES: COMBINE LEAVE AND TRAVEL TIME TO COMPUTE DETACHMENT AND REPORTING DATES. For travel by POC: 350 MILES PER DAY REQUIRED. TO FIGURE TRAVEL TIME, DIVIDE 350 INTO THE OFFICIAL HIGHWAY DISTANCE. IF REMAINDER EXCEEDS OR EQUAL 51 MILES, ALLOW AN EXTRA DAY FOR TRAVEL; IF IT IS LESS THAN 51, DISREGARD. NOTE: 4 days proceed time are allowed except under conditions listed in NCR 06301B; one disqualifying condition is between 2 units located/homeported within 25 miles of each other.				
ESTIMATED DETACHMENT DATE (MM-DD-YYYY)	LEAVE ENROUTE DESIRED (days)	ESTIMATED TRAVEL TIME	ESTIMATED REPORTED DATE (Allow 4 days processed time when applicable, MM-DD-YYYY)	
YES NO ARE DEPENDENTS TRAVELING? IF YES THEN TRAVELING WITH OFFICER TRAVELING SEPARATELY				
TRAVELING GET ARATEET	HOUS	SEHOLD GOODS		
APPROXIMATE WEIGHT LOCATION (Specify if goods are to be shipped to or from a location other than new or old duty station)				
DO YOU WANT ANY HHG IN LONG TERM NON-TEMPORARY STORAGE AT GOVERNMENT EXPENSE? NO YES WEIGHT OF HHG STORED: IF SHIPMENT OF POV INVOLVED AND AUTHORIZED (Outside U.S. transfers only):				
MAKE OF CAR	MODEL	. transiers only).	PORT OF SHIPMENT	
	PRIVACY	ACT INFORMATION		
The request for this information is authorized by 37 U.S.C 301, 44 U.S.C: your response to it voluntary. The data will be used to estimate travel and transportation allowance for member and dependents, delay enroute and travel time. Your reluctance in furnishing the data will result in your orders being prepared using minimum estimates and leave enroute not begin granted.				
REMARKS				

USE THIS FORM FOR PART II – TERMINAL ORDERS, OR PART III – INITIAL APPOINTMENT TO THE OFFICER TRAINING CENTER.				
Complete and send promptly through commanding officer (supervisor) and Marine Center (or other director) to CPC1. Appointees: Send this directly to NOAA Corps Commissioned Personnel Center. REMEMBER: Your orders cannot be prepared until this questionnaire is returned.				
PART II – TERMINAL TRAVEL ORDERS				
TO: COMMISSIONED PERSONNEL CENTER, CPC, SILVER SPRING, MD 20910				
THRU				
VIA		DATE		
NAME (Last – first – middle)	GRADE			
SOCIAL SECURITY NUMBER	SEPARATION DATE (MM-DD-YYYY)			
PRESENT OFFICAL DUTY STATION (City and state; only except ships, show ship and home port.) TO: (City and state; See next section.)				
IN ACCORDANCE WITH JOINT FEDERAL TRAVEL REGULATIONS. I ELECT MILEAGE FROM MY LAST DUTY STATION TO: HOME OF RECORD PLACE OF APPOINTMENT HOME OF SELECTION (Retirees Onleading Household Goods				
APPROXIMATE WEIGHT	LOCATION			
DESTINATION	<u> </u>			
DEPENDENTS				
SPOUSE'S NAME	CHILDREN (Names & Ages)			
DEPARTURE POINT				
DESTINATION				
PART III – INITIAL APPOINTMENT				
	TO OFFICER TRAINING CENTER			
NOTE: TRAVEL OF DEPENDENTS AND A SHIPMENT OF HOUSEHOLD EFFECTS TO YOUR TRAINING ASSIGNMENT IS NOT ENCOURAGED DUE TO LIMITED LIVING SPACE. THESE ENTITLEMENTS WILL BE MOST VALUABLE WHEN SHIPPING FROM YOUR PLACE OF APPOINTMENT OR HOME OF RECORD TO YOUR FIRST ASSIGNMENT AFTER COMPLETING THE TRAINING PROGRAM.				
NAME		DATE		
ADDRESS TO WHICH ORDERS SHOULD BE	CITY AND STATE IN WHICH OATH OF OFFICE WILL BE TAKEN			
□ NO □ YES ──	FFECTS TO THE OFFICER TRAINING CENTER? # OF LBS			
METHOD OF TRAVEL PRIVATE VEHICLE AIR OTHER (Specify)				
	mum of 350 miles per day. Divide the total direct distance (Us le we are required to use.) by 350 to determine how many da			