DEPARTMENT OF THE NAVY
OFFICE OF THE CHIEF OF NAVAL OPERATIONS
2000 NAVY PENTAGON
WASHINGTON, D.C. 20350-2000

IN REPLY REFER TO
2 May 01

MEMORANDUM FOR MAJOR CLAIMANT STAFF CHAPLAINS

Subj: FOCUS 02/01 (RETIRING CHAPLAINS AND RP'S)

Encl: (1) Chaplain/RP Retirement Information Form

1. Cancellation. Focus 4/98 is cancelled effective immediately.

2. It is important that all retiring chaplains and RPs be recognized for their years of faithful service. The Chief of Chaplains office provides every retiring chaplain and RP the following:

a. Personal letter

b. Laser-cut plaque with the CHC or RP emblem

c. Certificate of Appreciation for spouse (if applicable)

d. Change of address letter with envelope for retiring chaplain to update and send to the Chaplain Resource Branch, Norfolk, Virginia.

3. When a retirement date has been approved, and a ceremony date set, please ensure enclosure (1) is filled out and mailed or faxed to my office. The items listed in paragraph two can be mailed out as early as three months prior to the individual's **DEPARTURE**/ceremony date. This package is sent to the sponsor of the retiring chaplain or RP. To ensure delivery is made on time, your request should be submitted not later than 30 days before the required date.

4. Retirement ceremonies are important ways of recognizing those who have devoted themselves to God and country. We have a responsibility to take care of our own. Thank you in advance for your time and assistance. If you have any questions, please contact RPCS(SW/AW) K.L. Grayson at (703) 693-5407/DSN 223-5407, email Grayson.Kristy@hq.navy.mil, or fax (703) 614-4725/DSN 224-4725.

Barry C. Black
BARRY C. BLACK
Rear Admiral, CHC, U.S. Navy
Chief of Chaplains

Chaplain/RP Retirement Information Sheet

Retiree's Rank/Name: _____

Retiree's Spouse: _____

Active Duty Service Date (ADSD): _____

Approved Retirement Date: _____

Retiree's Duty
Station Address: _____
_____
_____
_____

Sponsor's Rank/Name: _____
Sponsor's Duty Station _____
Mailing Address: _____
_____
_____

Sponsor's Phone: _____
DSN: _____

Retirement Ceremony Date: _____

Retirement Ceremony Location: _____

Comments:

Enclosure (1)