



## NAVAL SPECIAL WARFARE GROUP FOUR PUBLIC EVENT SUPPORT REQUEST FORM

This form is used to request NSW participation in public events. The information is required to evaluate the event for appropriateness and compliance with DoD policies and for coordination with the units involved. Please complete all sections.

*Ensure all information is filled out completely. Indicate "None" or "N/A"  
PLEASE PRINT CLEARLY OR FILL OUT ELECTRONICALLY*

### **REQUESTER INFORMATION**

**NAME or MILITARY RANK:** \_\_\_\_\_  
**TITLE:** \_\_\_\_\_ **ORGANIZATION:** \_\_\_\_\_  
**PHONE NUMBER:** \_\_\_\_\_ **E-MAIL ADDRESS:** \_\_\_\_\_

### **GENERAL INFORMATION**

**SPECIFIC REQUIREMENT** (*i.e. Unit, equipment, etc.*): \_\_\_\_\_  
**DATE OF EVENT:** \_\_\_\_\_  
**TIME OF EVENT:** \_\_\_\_\_  
**TITLE OF EVENT** (*Website, if applicable*): \_\_\_\_\_  
**EXPECTED ATTENDANCE:** \_\_\_\_\_  
**SITE OF EVENT** (*i.e., Park, Auditorium, etc.*) (*NOTE: This site must be accessible to and usable by persons with disabilities.*): \_\_\_\_\_  
**ADDRESS OF EVENT** (*Street, City, State, ZIP Code*): \_\_\_\_\_  
**PROGRAM** (*Describe program theme and objective, audience size and civic makeup, and the purpose of Armed Forces participation.*) \_\_\_\_\_

**HAVE OTHER ARMED FORCES UNITS BEEN REQUESTED TO SUPPORT THIS EVENT?** (*If so, specify.*) \_\_\_\_\_

**IS THIS EVENT BEING USED TO RAISE FUNDS FOR ANY PURPOSE?** (*If so, specify how funds will be distributed.*) \_\_\_\_\_

**IS THERE ANY CHARGE?** (*i.e., admission, parking, etc. If so, specify.*) \_\_\_\_\_

**WILL ADMISSION, SEATING, AND OTHER ACCOMMODATIONS AND FACILITIES CONNECTED WITH THIS EVENT BE AVAILABLE TO ALL PERSONS WITHOUT REGARD TO RACE, CREED, COLOR, SEX OR NATIONAL ORIGIN?** \_\_\_\_\_

**GIFTS**

**IF REQUESTER HAS OR INTENDS TO OFFER ANY GIFTS TO MILITARY MEMBERS, PLEASE IDENTIFY GIFTS AND DOLLAR VALUE. NOTE: A GIFT IS BROADLY DEFINED AND INCLUDES ANYTHING OF ANY VALUE. EXAMPLES INCLUDE: TRAVEL, TRANSPORTATION, OR LODGING COSTS, FREE MEALS, AND FREE ATTENDANCE AT EVENTS.**

GIFT DESCRIPTION	DOLLAR VALUE
1.	
2.	
3.	

**REASON FOR REQUEST**

Please provide any additional information substantiating your request. What is the purpose or reason for your event? \_\_\_\_\_

**DISCLAIMER OF ENDORSEMENT**

Federal ethics rules prohibit military members from endorsing or appearing to endorse non-federal entities. Approval of this request does not constitute endorsement of the requester or its event.

REQUESTER hereby agrees that he/she/it will not use any Department of Defense (DoD), U.S. Navy (USN), or other US government entity imagery or personnel information for promotion or advertisement of its organization or the event described herein without the express written approval of the DoD, USN, or other appropriate US government entity. Imagery includes, but is not limited to, photos, graphics, video files, and command logos and seals. Personnel information includes name, rank, service, command affiliation, duty and occupation.

Requester signature: \_\_\_\_\_

REQUESTER also hereby agrees that he/she/it will not solicit or otherwise seek to obtain from participating Naval Special Warfare Group FOUR or Special Boat Team members any official statements or remarks of any kind without the express written approval of the Naval Special Warfare Group FOUR Public Affairs Officer.

Requester signature: \_\_\_\_\_

Questions concerning use of imagery, personnel information, and statements can be directed to the Naval Special Warfare Group FOUR Public Affairs Officer, MCC Keilman, at Robert.keilman@navsoc.socom.mil.

**CERTIFICATION**

I am acting on behalf of my requesting organization and certify that the information provided above is complete and accurate to the best of my knowledge. I also understand that operational commitments must take priority and can preclude a scheduled appearance at an approved public activity.

Signature of Requestor: \_\_\_\_\_