

PRIVACY ACT STATEMENT RELEASE FORM

For use by All ESGR Committee Members

In order to meet privacy act requirements in providing contact information, including email addresses and telephone numbers, to ESGR Committee members through the secure web site (ESGRNet) or to the public through the public web site (esgr.org), we must have each person's written permission.

For all members, we must have the following statement filled out, signed and the original document returned via U.S. mail.

Authority:

5 USC 301 and DoD Directive 1250.1. (National Committee for Employer Support of the Guard and Reserve)

Principle Purpose:

To obtain contact information about you for purposes of providing such information to ESGR Committee Members and others so that you may be contacted incident to, and in furtherance of, ESGR-related volunteer activity. Contact information will be posted to a non-public (secure) (ESGRNet) and/or public website (www.esgr.org). Such posting will be made only with your express consent.

Routine Use of Information:

Contact information is disclosed to Federal, State, and local agencies; other organizational entities; and individuals outside the Department of Defense solely for purposes of conducting ESGR-related business.

Disclosure:

Voluntary. However, failure to provide contact information will preclude ESGR members and others from identifying and contacting you. This will impact on your ability to effectively serve as an ESGR member unless and alternate means of contact is established.

ESGR COMMITTEE MEMBER

STATE OR TERRITORY: _____

COMMITTEE POSITION: _____

FULL NAME: _____

SSN: _____

Please provide one or all of the applicable modes of contact for ESGR-related business:

Phone (Please Specify home or business) _____

Fax: _____

E-mail Address: _____

Please indicate your agreement by signing the following:

I grant permission to the National ESGR to publish my contact information on the Secure web site (ESGRNET)

Signature: _____ Date: _____

In addition, if you are either the State Chair, Executive Director, Ombudsman Coordinator, Public Affairs Coordinator, Unit Liaison Coordinator, or Employer Relations Coordinator please indicate your agreement by signing the following:

I grant permission to the National ESGR to publish the above information on the ESGR web site (www.esgr.com)

Signature: _____ Date: _____

Please mail this **original** document to:
Volunteer Coordinator
National ESGR 1555 Wilson Blvd, Suite 319 Arlington, VA 22209