

## **AF Form/IMT 1382, Request for Review of Publication and/or Form/IMT(s)**

The following will guide you through the process of completing this form/Information Management Tool (IMT). Please read carefully before completing the form/IMT. The objective of the AF Form/IMT 1382 is to have the Office of Primary Responsibility (OPR) conduct a review on their publication and/or form to determine if it is current and essential, needs revision, or is unnecessary and can be rescinded/obsoleted.

### **SECTION I:** *(Completed by the Base Publishing Office)*

**TO:** This is the OPR on file with the Base Publishing Office.

**FROM:** This is the Base Publishing Office—MSD/SSHPP is forms/IMTs, MSD/SSHPP is publications.

**DATE OF REQUEST:** The date the AF Form/IMT 1382 was typed and sent out for review.

**SUSPENSE DATE:** This is the date due back to the Base Publishing Office. If the OPR requires an extension notify, the Base Publishing Office.

**1. PUBLICATION OR FORM/IMT NUMBER:** Short title of the publication or form/IMT under review.

**2. TITLE:** Long title of the publication or form/IMT under review.

**3. DATE:** Date of the publication or form/IMT under review.

**4. TYPE OF REVIEW:** Type of review the publication or form/IMT is under.

- **ANNUAL:** A required review initiated during the publication or form/IMT's anniversary month.
- **SPECIAL:** A review initiated outside the publication or form/IMT's anniversary month.
- **REPRINT:** We do not use this type of review.

**5. PRESCRIBING DIRECTIVE:** The OPR prescribes the form/IMT in a directive publication. A standard or specialized directive mandates the use of a form/IMT. This item is not used in publication reviews.

**6. ADDITIONAL INSTRUCTIONS:** This block will contain any special instructions or additional information regarding the review.

**7. QUESTIONS CONCERNING THIS REVIEW SHOULD BE DIRECTED TO:** Base Publishing Office POC for this review.

**8. SIGNATURE:** Base Publishing Office POC signature.

### **SECTION II:** *(Completed by the OPR)*

**TO:** Base Publishing Office – MSD/SSHPP for forms/IMTs, MSD/SSHPP for publications

**FROM:** Organization/office symbol, name, and duty phone number of current OPR.

**9. STATUS OF PUBLICATION:** Use this block to indicate the publication's status. Use Block 10 for Form/IMT Status.

- **A. Current and essential.** This indicates the publication doesn't need any revision or changes and is still a valid publication.
- **B. Requires revision.** This indicates the publication needs revision. If this block is checked, the Base Publishing Office will provide you, via e-mail, an editable copy of the publication (if available) and where to find help to aid you in the revision process. Indicate in Item 11 the date you intend to submit the fully coordinated draft revision to the Base Publishing Office. Do not hold the AF Form/IMT 1382 until the draft is complete; return it by the suspense date at the top of the form/IMT.
- **C. Requires change.** This indicates there is additional/new information to add to the publication, but will not require renumbering any paragraphs; you can add or delete paragraphs via a change. If any changes require renumbering a paragraph, you must revise the publication. Indicate in Block 11 the date you

intend to submit the fully coordinated draft change to the Base Publishing Office. Do not hold the AF Form/IMT 1382 until the draft is complete; return it by the suspense date at the top of the form/IMT. Contact the Base Publishing Office for assistance in producing a change to a publication.

- D. Regular reprint authorized. We do not use this block.
- E. Limited reprint for \_\_\_\_\_ months stock authorized. We do not use this block.
- F. Unnecessary and can be rescinded. If the publication is no longer needed, check this block. If you check this block, you must inform all agencies affected by the publication of your intent to rescind it.

**10. STATUS OF FORMS/IMT:** If the publication prescribes a form/IMT, indicate the status of the form/IMT in this section. Read the list of codes, pick the one appropriate code for the form/IMT and write it in next to the form/IMT number under the column labeled CODE.

- A. Current and essential. This indicates the form/IMT doesn't need any revision or changes and is still a valid form/IMT.
- B. Under revision. This indicates the form/IMT requires revision or redesign. Indicate in Block 12 the date you intend to submit the draft revision and completed DD Form 67, **Form Processing Action Request**, to the Base Publishing Office. Do not hold the AF Form/IMT 1382 until the draft is complete; return it by the suspense date at the top of the form/IMT.
- C. Obsolete. This indicates the form/IMT is no longer needed. You must submit a change to the prescribing directive to remove the form/IMT.
- D. Current with new prescribing publication which is shown after the form/IMT number. This indicates the form/IMT has a new prescribing directive.
- E. Obsolete (if replaced by new form/IMT, show new form/IMT number). This indicates the form/IMT has been replaced by another form/IMT. List the new form/IMT number after the obsolete form/IMT number.
- F. Regular reprint authorized. We do not use this code.
- G. Limited reprint for \_\_\_\_\_ months stock authorized. We do not use this code.

**11. DATE DRAFT OF REVISION OR CHANGE WILL BE SUBMITTED:** The date the OPR intends to submit the fully coordinated draft revision or change and completed AF Form/IMT 673, **Request to Issue Publication**, to the Base Publishing Office. The OPR establishes this date based on the amount of time they need to research, prepare, and coordinate the draft. Do not hold the AF Form/IMT 1382 until the draft is complete; return it by the suspense date at the top of the form/IMT.

**12. DATE REVISION OF FORM/IMT WILL BE SUBMITTED:** The date the OPR intends to submit the fully coordinated draft revision and completed DD Form 67, **Form Processing Action Request**, to the Base Publishing Office. The OPR establishes this date based on the amount of time they need to research, prepare, and coordinate the draft. Do not hold the AF Form/IMT 1382 until the draft is complete; return it by the suspense date at the top of the form/IMT.

**REMARKS:** Add any remarks.

**DATE:** The date the OPR signs the form/IMT.

**TYPE NAME AND TITLE OF APPROVING AUTHORITY:** The name and title of the OPR.

**SIGNATURE:** The OPR signs here.

After completion, the OPR returns the AF Form/IMT 1382 to the Base Publishing Office.

**\*\* Remember, it is the OPR's responsibility to notify the Base Publishing Office if there is a change in OPR for a publication or form/IMT. \*\***