



TRANSITION ASSISTANCE PROGRAM
Department of Defense, Office of Military and Security Assistance

FORT LEE SFL-TAP Registration Form

Event: Fort Lee Job Fair

Event Date: 26 April 2017

COMPANY INFORMATION

Company Name:

Mailing Address:

Telephone:

Website:

ATTENDING REPRESENTATIVES

NOTE: Complete information is required for installation Entry Authorization Lists (EAL).

1st REP

Name:

Job Title:

Tele:

Email:

2nd REP

Name:

Job Title:

Tele:

Email:

Electrical Outlet:

YES / NO

Display:

YES / NO