



MARINE CORPS LEAGUE FOUNDATION REQUEST FOR ASSISTANCE

"One Time, Lifetime Grants of Humanitarian Assistance"



PRINT/TYPE ALL INFORMATION – Use additional pages as necessary

Eligibility: ☐ Honorably Discharged Marine/FMF Corpsman/FMF Chaplain ☐ Family Member

Information as to why assistance is requested:

Name of Marine/FMF Corpsman/FMF Chaplain/Family Member submitting request:

Telephone: _____ Email Address: _____

Mailing address: _____

City: _____ State: _____ Zip Code: _____

Requested Amount of Assistance: \$_____

List creditors and/or types of assistance requested (attach copies of bills from creditors, statements are not accepted):

List Monthly Expenses

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

List all monthly income coming into the household:

ON A SEPARATE SHEET, DETAIL YOUR FINANCIAL PLANNING MOVING FORWARD TO ENSURE YOU DO NOT END BACK UP IN THIS SAME SITUATION IN NEED OF ASSISTANCE. (Your request for assistance will not be considered without this statement, and information that can be verified)

DOCUMENTS REQUIRED (Request will not be considered without these documents):

1. This completed Request for Assistance form, and form must be completely filled out.
2. Marine/FMF Corpsman/ FMF Chaplain's last DD-214, showing active duty and Honorable Discharge
3. Bills from all creditors seeking assistance with (Statements will not be considered, it has to be current bills)
4. Current bank statement showing last 30 days of financial transactions
5. Detailed plan to gain financial stability as to not return to current financial situation

Review Process (the review process is used to verify the actual need of the prospective recipient of financial aid prior to the distribution of any funds):

1. Documents need to be sent to the President, MCL Foundation at president@mclfoundation.org or by mail to MCL Foundation, PO Box 180 Franklin, NC 28744
2. Once all documents are received by the President, MCL Foundation, the documents will be reviewed for validation of information
3. The President will send the request to the MCL Foundation Board of Directors for a decision

4. Upon receiving a majority vote from the MCL Foundation Board of Directors, the President of the MCL Foundation will notify all parties as to the decision rendered.
5. If approved the Treasurer will remit payments to creditors listed, the MCL Foundation does not issue checks to the individual making the request.
6. The review process will be concluded within 72 hours, barring any delays.

ACTION BY MCL FOUNDATION

Request Received by: _____ Date: _____

Date Request Sent to MCL Foundation Board: _____

MCL Foundation Board Decision (Approved/Denied): _____ Date: _____

If Approved, Amount Approved: \$ _____