



# NAVY-MARINE CORPS RELIEF SOCIETY

Quick Assist Loan Application for Active Duty Sailors and Marines

Local Unit Code:  
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**Active Duty ID and most recent LES are required to apply for this interest-free loan.**

Date:	All elements of the application process must be completed prior to receiving a QAL.				
Last Name:	First:	Middle:	Suffix:	SSN: _____	
Branch of Service: <input type="checkbox"/> Navy <input type="checkbox"/> Marine Corps		Military Status: <input type="checkbox"/> Active <input type="checkbox"/> Reserve <input type="checkbox"/> >30		Rate/Rank:	Pay Grade:
				EAS/ETS:	Date of Birth:
Military Unit:	UIC/RUC:	Local Home Address:		Permanent Home of Record:	
Address:					
<input type="checkbox"/> Work Phone:	<input type="checkbox"/> Cell Phone:		<input type="checkbox"/> Home Phone:		
<input type="checkbox"/> Work Email:			<input type="checkbox"/> Personal Email:		
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married (Date: _____) <input type="checkbox"/> Divorced (Date: _____) <input type="checkbox"/> Legally Separated (Date: _____)		#Dependents: _____ Spouse is: <input type="checkbox"/> Civilian <input type="checkbox"/> Active Military <input type="checkbox"/> Reserve <input type="checkbox"/> Retired	Preferred Contact Method: Please check preferred email and phone above. Spouse Name: _____ Spouse Birth Date: _____ Spouse SSN: _____		
Loan Information - to be completed by Active Duty service member					
Amount Requesting: \$ _____ (minimum \$100 to maximum \$500)					
Repay Months: 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> *Allotment must be a minimum of \$11.00 per month.					
The intended purpose of this loan is for: <input type="checkbox"/> BLE (housing, food, utilities, clothing) <input type="checkbox"/> Dental Expenses <input type="checkbox"/> Family Emergencies <input type="checkbox"/> Medical Expenses <input type="checkbox"/> Transportation					
Are you pending any type of early discharge/release?      Yes <input type="checkbox"/> No <input type="checkbox"/>					
Are you pending, or have you had, any disciplinary or adverse administrative action in the last 6 months?      Yes <input type="checkbox"/> No <input type="checkbox"/>					
Are you under Chapter 7 or Chapter 13 bankruptcy protection?      Yes <input type="checkbox"/> No <input type="checkbox"/>					
<b>IMPORTANT:</b> Please advise if you are currently in an "overdraft" status with your bank. The bank may use these funds to recoup their money.					
The above information is true and accurate to the best of my knowledge. I am aware of all my financial obligations and I am able to repay this loan. I understand that monies loaned from the Navy-Marine Corps Relief Society are donated by my fellow Sailors and Marines.					
Signature:				Date:	