

Request for Chaplain's Fund Assistance

DEFINITIONS:

REQUESTOR: The requestor is the CSM, CCM, FAC, or other *Leader* who is requesting assistance from the Sergeants Major Association of California Chaplain's Fund on behalf of a soldier, airman, or family. See SMA Form CF1, Guidelines for Assistance.

BENEFICIARY: The beneficiary is the soldier, airman, or family for whom we are to provide assistance.

RESPONSIBILITY:

REQUESTOR: The requestor is responsible to insure that the application is accurate and complete.

BENEFICIARY: The *Beneficiary* is responsible to provide complete, accurate and truthful information to the requesting leader.

INSTRUCTIONS:

This form and the Chaplain's Fund Leader's Guide must be used together. The Leader's Guide describes the policy and procedures for requesting assistance and explain what we need to know; this form is the format and method of providing that information. Failure to provide the information described in the Leader's Guide **will delay** processing of this request.

Download and complete the form electronically. Save the request and email it as indicated in the "How to Submit" instructions below. Name the saved form using this format: Last Name First Initial Rank. For example, save a request for SGT John Doe as "Doe J SPC request"

If it is not possible to complete the form electronically, print it and complete it by hand and call SFC (Ret) Charles Massicotte at 714-264-4680 or MSG (Ret) Ken Wahl at (Weekdays) 916-274-5947 or 916-663-3860 (Evenings) for submission instructions.

Complete ALL items. Failure to provide all requested information will result in the request being denied.

If an item is not applicable, enter "NA."

If information duplicates the information provided in a previous item enter "Same as Item #"

Use item 10 to provide additional information necessary to explain and justify the request. The more information you provide to help us understand what is needed and why, the better we will be able to make an informed decision to help the soldier/airman.

The beneficiary may provide input and help to complete the request; however ***the requesting Leader is solely responsible for providing justification and input about how we are to assist the soldier, airman, or family.***

The requesting Leader must describe what happened to cause the hardship and what actions have been taken to resolve the problem and provide assistance, before requesting assistance from the Sergeants Major Association. See the Guidelines for assistance. Be detailed and specific.

A CSM/CCM in the soldier or airman's NCO chain (or FAC if applicable) must recommend whether we are to provide assistance as a Grant, Loan, or Combination Grant and Loan, and the reason why. Again, provide specifics. If the CSM/CMSgt cannot provide input the requestor must make that recommendation and explain the absence of the CSM/CMSgt's involvement. ***We will not approve a request without input from the Soldier/Airman's NCO Leaders (or FAC).*** If the first level 1SG/CSM/CMSgt are not available to provide the required leader input, depending on the circumstances, we may accept other leadership input.

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If we are to provide all or part of the assistance as a no-interest loan, **the requesting leader must work out payment terms with the beneficiary** and indicate the terms, for example,

“Request a \$500.00 Grant and \$600.00 Loan, Total \$1,100.00, with loan payments of \$60.00 per month beginning on June 15th 2009.”

The soldier, airman, or authorized family member maybe required to sign a Promissory Note for any loan amount.

Incomplete, inaccurate, or unclear information will delay processing.

We cannot pay without complete payee information. We must have complete payee contact information so that we can verify check mailing address, account number, payment amount, etc.

We use the personal and financial information that you provide only to verify the information in the request. We do not, and will not, disclose any personal or financial information to any third party.

By requesting Chaplain's Fund assistance, the soldier, airman, or family member authorizes us to verify all information provided in the request.

Exceptions to Policy: If the requesting leader believes that we can best help the soldier, airman, or family and resolve the financial crisis by providing additional (more than \$800), or repeat assistance (a second request for the same soldier, airman, or family, but for a new or different problem), he may request an exception to policy to provide the additional financial assistance. The requestor must fully explain and justify why we should approve an exception to policy. Any assistance approved under an exception to policy will be provided as a loan; the request and justification must substantiate the soldier's/airman's willingness and ability to repay the loan. The SMA President approves exceptions to policy; if the president is not available, any two Executive Board members may approve exceptions to policy. ***Use item 10 to request exception to policy.***

Current versions of this request and the Chaplain's Fund Guidelines can be downloaded from our website at <http://www.smaofcalifornia.org>.

HOW TO SUBMIT

1 - ***Review the request!*** Are all items complete? Can we make an informed decision to approve or disapprove the request based on the information you have provided? If you have questions, we will probably have questions. Be sure you have given us enough information to provide a fair response to the soldier, airman, or family you are trying to help. If you are not sure, contact us ***before*** you submit.

2 - ***Email the completed request*** to SFC (Ret) Chuck Massicotte at cmassicotte@roadrunner.com ***WITH COPIES TO*** MSG (Ret) Ken Wahl at kwahl1@sbcglobal.net, 1SG Reggie Jones, lsgjones@comcast.net, and MSG (Ret) Robert Embrey at “kd6dkv@verizon.net”

3 - ***If you have questions***, email any or all of the above and/or call SFC (Ret) Charles Massicotte at 714-264-4680; or MSG (Ret) Ken Wahl (weekdays) 916-274-5947 or evenings 916-663-3860; or the Association Chaplain, MSG (Ret) Bob Embrey at 626-339-3402.

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REQUEST DATE (DDMMYY) _____

(1) SOLDIER/AIRMAN/FAMILY INFORMATION

Soldier/Airman's Name /Rank _____

Home Address _____

Day time phone _____

Evening phone _____

Email _____

Marital Status (and Spouse name) (If Applicable) _____

Number of children in home & ages _____

Is the soldier/airman employed? YES / NO _____ Is the spouse employed? YES / NO _____

Briefly describe employment and income situation. Include employer name and monthly income amount

(2) UNIT AND LEADER INFORMATION

Assigned Unit _____

Unit Address _____

Unit Point of Contact (Name and position) _____

Phone _____

CSM/CCM (Name) _____

Daytime phone _____

Evening phone _____

Email _____

FAC (If Applicable) (Name) _____

Daytime phone _____

Evening phone _____

Email _____

(3) REQUEST INFORMATION

Total Dollar amount requested \$ _____

Will this be a: GRANT _____ LOAN _____ Combination GRANT and LOAN _____

Terms (If a loan or combination grant and loan is requested, the CSM/CCM/FAC **must** indicate loan amount and proposed payment terms)

Has this soldier/airman/family previously requested Chaplain's Fund assistance? YES / NO _____

Was the request approved? YES / NO _____

If yes, When? (Date) (MMM/YY) _____ How Much? \$ _____

For what purpose? _____

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Is the soldier/airman deployed? YES / NO _____

Is a current or prior deployment a factor in this request? YES / NO _____

Deployed unit _____

How did deployment cause or contribute to the financial problem(s)? _____

REASON FOR REQUEST (TO BE COMPLETED BY SOLDIER'S/AIRMAN'S NCO LEADERSHIP)

Problem / Issue (Describe what happened)

Problem / Issue Resolution (Describe resources used / action(s) already taken to fix the problem.

Action Requested (Describe what you want us to do)

(4) PAYMENT INFORMATION

Purpose of payment (What is this payment for) _____

Name of Business / Individual _____

Acct # _____

Amount to be paid \$ _____

Check Mailing Address _____

POC & Phone # _____

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Acct # _____

Amount to be paid \$ _____

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