

**RELOCATION
ASSISTANCE
PROGRAM**



Moving Made Easy

WELCOME ABOARD PACKAGE REQUEST FORM

Marine & Family Programs
 MCCA Information & Referral Program
 PSC 561 Box 1863 - FPO AP 96310-0019
 DSN: 315-253-6161 / FAX DSN: 315-253-4149
 Commercial Phone: 011-81-827-79-6161 / Commercial Fax: 011-81-827-79-4149
 Email: ombiwainforeferrelo@usmc-mcca.org

Name:		
Rank:		
Current command:		
Date of detachment:		
New duty station:		
New command:		
MCC of new command:		
Date of arrival:		
Marital status:	Married	Single
Is your tour:	Accompanied	Unaccompanied
Spouse's name (if accompanied):		
Ages of children:		
Do you have dependents in the Exceptional Member Program?		
Would you like to request a sponsor?	Yes	No
Are you bringing pets?:	Yes	No
Phone numbers (work & home):		
E-mail address (work):		
E-mail address (personal):		
Leave address (if applicable):		
Any other comments:		