

MARINE CORPS REQUEST MAST APPLICATION

NAVMC 11296 (Rev. 6-97)

SN: 0000-00-888-0350 U/I: EA

PRIVACY ACT STATEMENT

Authority: Title 5, U. S. Code 301; Title 10, USC Section 5013

Principal Purpose: Formal filing of complaints/problems to command personnel.

Routine Uses: To provide a record to facilitate personnel management actions and decisions; to serve as a data source for complaint/problem information and resolution efforts.

Disclosure: Disclosure is voluntary. Failure to complete the requested items could result in delayed command action and/or an inaccurate/incomplete analysis of the complaint/problem.

PART I: TO BE COMPLETED BY THE APPLICANT

1. NAME:	2. RANK:	3. SSN:
4. UNIT:	5. RACE/ETHNIC GROUP:	
6. GENDER:	7. DATE:	

8a. I desire to Request Mast with: (Provide the name and billet of the Commanding Officer with whom you desire to communicate.):

8b. NATURE OF COMPLAINT/PROBLEM: (Give in as much detail as possible the basis of your complaint; describe the incident(s)/behavior(s) and date(s) of the occurrence(s); the names of the individuals involved, witnesses and to whom it may have been previously reported. Include any other information relevant to your complaint/problem. Attach additional sheets, as needed).

8c. REQUESTED REMEDY/OUTCOME: (Clearly state what assistance or complaint resolution you are seeking from the commanding officer named in 8a above.)

9. AFFIDAVIT

I, _____, have read this statement which begins in Block 8b on this page (page 1) and ends on page _____. I fully understand the statement made by me and certify the statement is true. I have initialed all corrections. I make this formal statement without threat of punishment and without coercion, unlawful influence, or unlawful inducement.

(SIGNATURE OF APPLICANT/DATE)

PART II: TO BE COMPLETED BY THE OFFICER CONDUCTING REQUEST MAST

10. DISPOSITION: (Provide a detailed explanation of actions taken or attempted to resolve the complaint/problem, to include any other referrals. If an inquiry/investigation was initiated as a result of this complaint, provide the type conducted and the results. Attach additional sheets as necessary.)

COMMANDING OFFICER SIGNATURE/DATE

PART III: APPLICANT'S ACKNOWLEDGMENT OF REQUEST MAST

(Applicant should initial/complete the appropriate statement(s))

_____ I have had the opportunity to communicate directly with my Commanding Officer named in Block 8a and understand the disposition or probable disposition of my problem/complaint.

_____ I have had the opportunity to communicate directly with _____ (name and billet of commanding officer subordinate to officer named in Block 8a), understand the disposition or probable disposition of my problem/complaint, and voluntarily withdraw this Request Mast.

_____ I have not had the opportunity to communicate directly with my Commanding Officer named in Block 8a.

_____ I have had the opportunity to communicate directly with my Commanding Officer named in Block 8a but have not been informed of the disposition or probable disposition of my problem/complaint.

WITNESS' SIGNATURE/DATE

APPLICANT'S SIGNATURE/DATE