Request for Assessment

Inspector General of the Marine Corps
Headquarters United States Marine Corps
FOB#2 Navy Annex
Washington, DC 20380-1775

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FAX (703) 697-6690 or TOLL FREE (866) 441-5089
EMAIL ORGMB.HQMC.IGMC @ nmci.usmc.mil

PERSONAL INFORMATION

Name*

(Last Name, First Name, Middle Initial)

Grade / Rank* **Billet / Title***

E-Mail Address ***(*.MIL)***

Must be a valid usmc.mil address

Organization / Agency*

Address / City/ State *

Commercial Phone* / DSN **Ext.**

ADDITIONAL INFORMATION

Assessment Requested*

Control No.*

Justification for Request*

Signature Field*

In order to verify requestee, this form must be signed (digital or manually)

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DATE RECEIVED _____ **APPROVED** _____

RPT FORWARDED _____ **APPROVED BY** _____