



**CMPA DEPARTURE GIFT AND
CREDENTIALS REQUEST FORM**

**CMPA
Bylaws
Bylaw 5/6 – Annex A**

I AM REQUESTING (Check one or Both) <input type="checkbox"/> Departure Gift <input type="checkbox"/> Retirement Credentials			
A. MEMBER'S INFORMATION			
<input type="checkbox"/> Regular Force		<input type="checkbox"/> Reserve Force	
<input type="checkbox"/> Associate Member		<input type="checkbox"/> Honorary Member	
Surname		Given Names	
SN	Rank	Badge #	QL3/MPOC Graduation Date (D/M/Y)
Current Unit		Base/Location	
Home Address		Town/City	Province
Postal Code			
Did You RETIRE or RELEASE from the CF? (Check one box only)		<input type="checkbox"/> RETIRE	<input type="checkbox"/> RELEASE
ANNUITY: Are you receiving a monthly annuity, either Medical or Pension?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
RELEASE ITEM:			
Did you release Honourably from the CF?		<input type="checkbox"/> YES	<input type="checkbox"/> NO Release Item?
B. DEPARTURE GIFT ENGRAVING AND CREDENTIAL ID CARD INFORMATION			
First Name:		Last Name:	Initials:
Rank (In full)		Post-Nominals (MMM, CD, etc.)	
CF Enrollment Date	day/month/year	Release / Retirement Date	day/month/year
C. DEPARTURE GIFT - BADGE AND SHADOW BOX (Refer to By Law 5 for cost criteria)			
Every effort will be done to have your most recently issued MP badge mounted inside the shadow box. If the badge is not available, a replica badge may be used in its place and will be inscribed with either " Retired " or " Veteran " in place of a badge number.			
If badge is not available, please indicate your preference.		<input type="checkbox"/> Veteran <i>Not Receiving Pension</i>	<input type="checkbox"/> Retired <i>Receiving pension</i>
		<input type="checkbox"/> Refund <i>Will be issued</i>	
D. RETIREMENT CREDENTIALS (Available at a cost from the MP Kit shop.)			
<i>Further Purchase information will be provided on receipt of application</i>			
A colour digital passport-style photograph (Showing your Head and Shoulders) (approx. 3cm x 3cm, business attire) must be emailed along with this application to the CMPA Gift Coordinator at cmpadeparturegift@gmail.com .			
E. DELIVERY INFORMATION			
Departure gifts are to be mailed to:		<input type="checkbox"/> DWD Coordinator	<input type="checkbox"/> Member (Address above)
DWD Coordinator	Rank	Name	Unit
Mailing Address <i>Use a Canada Post mailing address as the gift is mailed via Canada Post Expedited Parcel Service.</i>			
Address		Town/City	Province
Postal Code			
Telephone:		Email:	