

# CGMA Funding Request Application: Client Guide

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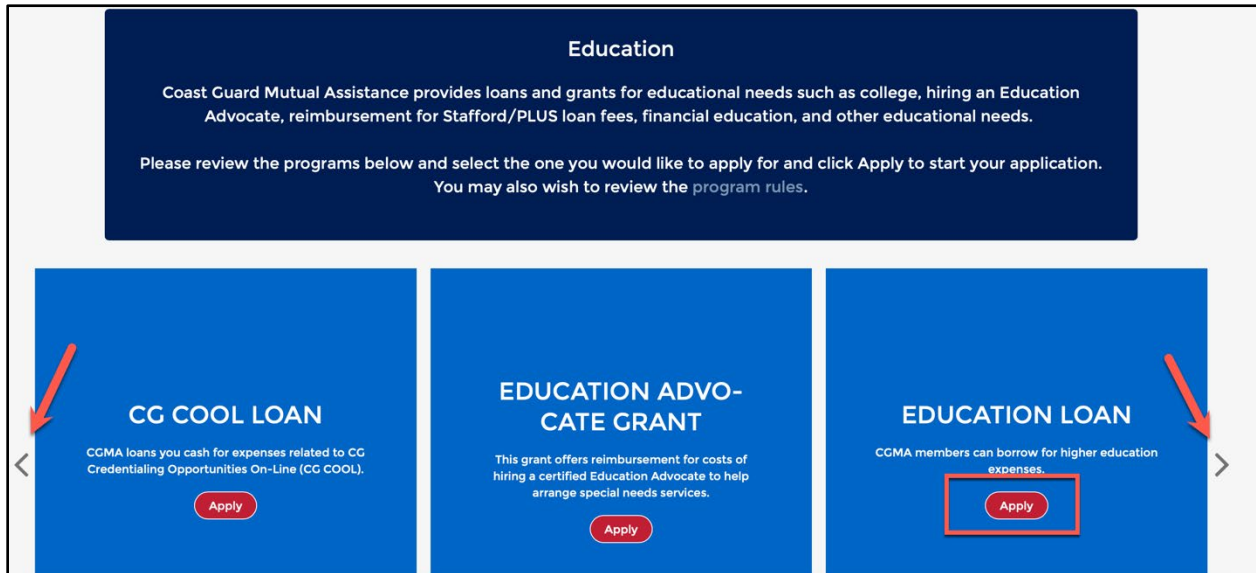
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## Selecting a Program

1. Login to the CGMA Portal using your credentials: <https://portal.mycgma.org/s/login/>
2. View the navigation bar and choose a Program to begin your application for. Under the Assistance Programs dropdown menu, there are three Program groups:
  - a. Disaster
  - b. Education
  - c. Day-to-Day



3. Use the arrows on either side to scroll through the Program listings.
4. To begin your application for the selected Program, click the red “Apply” button.



5. Your applicant information will be shown on the left. This information can be changed later.
6. In the Applying As dropdown, select the type of applicant you are.

- If the Applying As type selected is ineligible for the Program type, return Home and select a different Program. If you have any questions on Program eligibility, please reach out to your rep.

Funding Program  
Education Loan

Status      Start Date      End Date

In Progress

---

**Assistance Application**

Unfortunately, you do not qualify for assistance from this program, but please visit our [website](#) to find programs that could be a better fit.

**Applicant Information**

PO2 CGMA User, USCG

**Education Loan**

\* Applying as  
DoD Member

CGMA is dedicated to a policy of fair treatment. At all times, CGMA will provide an environment that promotes dignity, respect, fairness, and inclusion. These are essential ingredients to the sustenance of operational excellence, a positive office climate, and a healthy work environment. All CGMA personnel and representatives will comport themselves in accordance with Coast Guard civil rights policies at all times. All CGMA clients will adhere to this policy in their interactions with CGMA-HQ personnel and CGMA Representatives.

Exit and Return to Programs

### Applying as a Dependent

- If you are a non-member, or applying for someone other than yourself, select the dependent option.
- If we have a record of a related Sponsor in the system you can select them. You can also update their information later in the application.
  - If an existing Sponsor is found connected to your Account but is not the person this Funding Request is for, you can still choose to create a new sponsor.
- If a related Sponsor is not found, please enter your Sponsor's information in the fields shown.
- For both options, you are also required to select your Sponsor's Member Type which must be eligible for the Program.

**Assistance Application**

**Applicant Information**

CGMA Dependent

\* If a related sponsor is found, you can select it below, otherwise, please create a new Sponsor

Related Sponsor: PO2 CGMA Member, USCG  
 Create New Sponsor

**Education Loan**

\* Applying as  
Dependent

**Add a Sponsor**

\* First Name

\* Last Name

\* Sponsor is  
--None--

Middle Name

Suffix

Sponsor is Deceased

CGMA is dedicated to a policy of fair treatment. At all times, CGMA will provide an environment that promotes dignity, respect, fairness, and inclusion. These are essential ingredients to the sustenance of operational excellence, a positive office climate, and a healthy work environment. All CGMA personnel and representatives will comport themselves in accordance with Coast Guard civil rights policies at all times. All CGMA clients will adhere to this policy in their interactions with CGMA-HQ personnel and CGMA Representatives.

## Applying as a Member

- If you are the eligible Member, select your Applicant Type.
8. If the chosen Program allows additional recipients to be added, you will be able to select whether or not the Funding Request has additional recipients besides the Applicant/Member.
  9. Review the information you've provided. In order to change the choices entered on this page at a later time, you will need to reach out to your rep for assistance.
  10. Once you've confirmed all data you've entered is correct, please "Save and Continue" to create your application.

**Assistance Application**

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<b>Applicant Information</b> PO2 CGMA Member, USCG	<b>Education Loan</b> * Applying as Active Duty Member
-------------------------------------------------------	--------------------------------------------------------------

\* Is there anyone else who will be a recipient of this assistance?  
Yes

CGMA is dedicated to a policy of fair treatment. At all times, CGMA will provide an environment that promotes dignity, respect, fairness, and inclusion. These are essential ingredients to the sustainment of operational excellence, a positive office climate, and a healthy work environment. All CGMA personnel and representatives will comport themselves in accordance with Coast Guard civil rights policies at all times. All CGMA clients will adhere to this policy in their interactions with CGMA-HQ personnel and CGMA Representatives.

[Save and Continue](#)

## Funding Request Application Page

Once you click Save & Continue, you will be directed to the home page of your application, where you will navigate through each section to input your information. When a section is completed, the corresponding button will turn green. In order to proceed to the Final Questions and Submit your application, all prior sections must be completed first. You may return to previous sections and make changes even if they have already been completed. Once your Funding Request is submitted, you will no longer be able to make changes.

The screenshot displays the 'Funding Request' interface for 'FR-0448518-Member'. At the top, a table provides summary information:

Funding Program Rules	Status	Status Detail	Total Loan Amount	Total Grant Amount
Education Loan	In Progress		\$0.00	\$0.00

Below the table, a section titled 'Complete each step below:' lists the application steps in a vertical stack of buttons:

- Member Profile
- Applicant Profile
- Recipients
- Detail Items
- Documents
- Final Questions & Submit

To the right, a 'Summary' tab is active, showing the following details:

- Applicant: **CGMA Dependent** - Dependent
- Member: **PO2 CGMA Member, USCG** - Active Duty Member
- Applicant Comments:

  - ▼ Dates
    - Created By:
    - Submitted:
    - Closed:
  - ▼ Amounts

Once the Rep Site has been set for this Funding Request, the representative's contact information will be available below the navigation. You can also [Find Your Rep](#) at any point and reach out if you have any questions during the application process.

The screenshot shows a vertical stack of navigation buttons: 'Detail Items' (green), 'Documents' (red), and 'Final Questions & Submit' (red). Below these is a red-bordered box containing contact information:

Your CGMA Representative is there to help if you are stuck, have questions, or need to provide further information:

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Capital Rep Site  
CGMA Site Rep, R  
cgma.r.site@uscg.mil

Let us know how we're doing! You can fill out this survey multiple times: [CGMA Portal Feedback](#).

## Member Profile

**Member Profile**  
Please fill out the following information about your Sponsor.

<p>* First Name CGMA</p> <p>Middle Name</p> <p>* Last Name Member</p> <p>Suffix</p> <p>* Unit USCG Auxiliary POLK COUNTY FLORIDA</p> <p>* Year Joined 2020</p> <p>* Personal Email cgmmember@gmail.com</p> <p>* Mobile Phone 800-881-2462</p> <p>* Address</p> <p>* Country United States</p> <p>* Street 1005 N Glebe Road</p> <p>* City Arlington</p> <p>* State/Province Virginia</p> <p>* Zip/Postal Code 22201</p>	<p>* Direct Access Employee ID 1234567890</p> <p>* Branch U.S. Coast Guard</p> <p>* Rank/Grade PO2 - E5</p> <p><input checked="" type="checkbox"/> EOE / ESO Required ⓘ</p> <p>* EOE / ESO Date ⓘ Dec 31, 2025</p> <p>* Are you Married? No</p> <p>* Number of Dependents (including spouse) 1</p> <p>* Work Email cgma.t.member@uscg.mil</p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Cancel Save and Exit Save and Continue

1. If you are filling the application out for yourself, you will enter your own information. If you are a dependent filling out the application for your Sponsor, you will enter your Sponsor's information in this section.
2. Any existing information that CGMA has about you or your Sponsor will be pre-populated. Please update personal detail information as needed and ensure all required fields are completed.
3. The following additional fields are only shown for certain Member Types. Please see details on what each field is requesting:
  - a. Unit: If Member is Active Duty, Reserve, or Civilian Employee, enter Member's Unit.
  - b. VA Disability Rating %: If Member is Retired, enter %
  - c. Year Joined: If Member is Active Duty, Auxiliary Member, Reserve, or Civilian Employee, enter year joined (format: YYYY). The year must be between 1900 and the current year.
  - d. Year Retired: If Member is Retired, enter the year of retirement (format: YYYY). The year must be between 1900 and the current year.
  - e. Direct Access Employee ID: If Member is Active Duty or Reserve, enter ID number.
  - f. Auxiliary ID: If Member is Auxiliary Member, enter ID.
  - g. Social Security Number: If the Member is Auxiliary Member, Civilian Employee, Chaplain, PHS Officer, DoD Member, SSN is required.

- i. If SSN is displayed, please review the last 4 digits. No action necessary if the number is correct.
  - ii. If SSN incorrect or no number is present, please enter the Member's full SSN. Only enter numerical values.
- h. Branch: If Member is Active Duty, DoD Member, Chaplain, PHS Officer, Reserve Retired, enter Branch and related Rank. U.S. Coast Guard must be selected for Branch UNLESS Member Type is DoD Member.
- i. Civilian Paygrade: If Member is Civilian Employee, enter paygrade.
- j. EOE/ESO Date: If Member is Active Duty or Reserve and Year Joined is within the past 19 years, enter EOE/ESO. Date must be in the future.
- k. Work Email: If Member is Active Duty or Civilian Employee, enter work email.

**Member Profile Navigation:**

- Cancel: Return to Funding Request Page without saving any changes.
- Save and Exit: Save changes and return to Funding Request Page (all required fields must be filled out).
- Save and Continue: Save and proceed to the next section of application.

## Applicant Profile

If you are applying as a Dependent, fill out the Applicant Profile section with information about yourself.

**Applicant Profile**

* Relationship to Sponsor Spouse	* Dependent Authority Sponsor can authorize by email
* First Name CGMA	* Birthdate May 22, 1990
Middle Name	* Personal Email cgmadependent@gmail.com
* Last Name Dependent	* Mobile Phone 888-590-2000
Suffix	

1. Enter required personal details and relationship to Sponsor
2. Choose Dependent Authority option
  - a. Sponsor can authorize by email: Sponsor will be emailed upon completion of Funding Request.
  - b. Have Power of Attorney: Requirement will be created to attach a document as proof of Power of Attorney. To be completed in Document Section.
  - c. Have CGMA Authorization Form: Requirement will be created to attach completed CGMA Authorization Form. To be completed in Document Section.
  - d. Other: ??

### Applicant Profile Navigation

- Cancel: Return to Funding Request Page without saving any changes.
- Save and Exit: Save changes and return to Funding Request Page
- Save and Continue: Proceed to next section of application



## Recipients

If Funding Request has additional recipients besides the Applicant/Member, you can add those recipients and their information in this section. Review any instructions provided in the Recipient Entry Instructions.

The Member and Applicant (if different) are automatically created as recipient(s). Please only enter additional recipients. This section is considered complete when at least one non-member and non-applicant recipient has been added.

### Recipient Table

- Displays the current recipients related to the Funding Request.
- To edit or delete, select the Recipient you wish to make changes to and choose the action you want to take with the radio buttons below and click “Next”.
- To add more recipients, select the “Add one or more recipients” button.

Recipients		
Funding Request Recipients		
3 of 3 items • 0 items selected		
Contact Name	Role	Status
<input type="checkbox"/> USCG Child Member	Recipient	Current
<input type="checkbox"/> CGMA Member	Military Member	Current
<input type="checkbox"/> CGMA Dependent	Non-Member Applicant	Current

Recipient Entry Instructions: Add the student(s) here.

\* Use buttons below to adjust your recipient(s)

- Continue, no more changes needed
- Add one or more additional recipients
- Edit selected recipient
- Delete selected recipient

### Adding Recipients:

Recipients		
Funding Request Recipients		
3 of 3 items • 0 items selected		
Contact Name	Role	Status
<input type="checkbox"/> USCG Child Member	Recipient	Current
<input type="checkbox"/> CGMA Member	Military Member	Current
<input type="checkbox"/> CGMA Dependent	Non-Member Applicant	Current

Recipient Entry Instructions: Add the student(s) here.

\* Use buttons below to adjust your recipient(s)

- Continue, no more changes needed
- Add one or more additional recipients
- Edit selected recipient
- Delete selected recipient

1. Select “Add one or more additional recipients” button and click “Next”

2. To add more than 1 recipient, click the “Add” button and additional Recipient cards will appear. Fill out recipient details.
3. To remove an un-needed Recipient card, click the “Remove” button.
4. Once desired Recipients have been added, hit “Save”. Newly entered recipient(s) will be shown on the Recipients Table.

### **Editing Recipients:**

**Recipients**

**Funding Request Recipients**  
3 of 3 items • 1 item selected

<input checked="" type="checkbox"/> Contact Name	<input type="checkbox"/> Role	<input type="checkbox"/> Status
<input checked="" type="checkbox"/> USCG Child Member	Recipient	Current
<input type="checkbox"/> CGMA Member	Military Member	Current
<input type="checkbox"/> CGMA Dependent	Non-Member Applicant	Current

Recipient Entry Instructions: Add the student(s) here.

\* Use buttons below to adjust your recipient(s)

Continue, no more changes needed  
 Add one or more additional recipients  
 Edit selected recipient  
 Delete selected recipient

1. From the Recipient Table, select the Recipient you want to edit
2. Select “Edit selected recipient” button and hit “Next”
3. Change previously entered values relating to the recipient.
4. To save edits, click “Save” and return to Recipient Table.

\* First Name  
USCG Child

Middle Name

\* Last Name  
Member

Suffix

\* Birthdate  
Sep 15, 2010

Email  
you@example.com

\* Relationship to Sponsor  
Child

\* Role  
Recipient

### **Deleting Recipients:**

1. To delete Recipients, select the Recipient you would like to delete from the table.
2. Click “Delete selected recipient” and click “Next”.
3. Confirm the deletion of the Recipient or cancel action and keep Recipient.

**Recipients**

**Funding Request Recipients**  
3 of 3 items • 1 item selected

<input checked="" type="checkbox"/> Contact Name	Role	Status
<input checked="" type="checkbox"/> USCG Child Member	Recipient	Current
<input type="checkbox"/> CGMA Member	Military Member	Current
<input type="checkbox"/> CGMA Dependent	Non-Member Applicant	Current

Recipient Entry Instructions: Add the student(s) here.

\* Use buttons below to adjust your recipient(s)

Continue, no more changes needed  
 Add one or more additional recipients  
 Edit selected recipient  
 Delete selected recipient

Are you sure you want to remove this recipient?

Name: USCG Child Member  
Role: Recipient

\* Choice

Yes, delete  
 No, don't delete

### **Recipient Final Navigation:**

When finished with the Recipient section, you can proceed to the next section or return to the Funding Request Page.

- To go to next section, select “Continue, no more changes needed” and click “Next”
- To exit and return, click “Save and Exit”. It does not matter which radio button is chosen.

## **Detail Line Items**

For all non-zero dollar Funding Programs, Applicants will complete the Detail Line Item section. In order for this section to be completed, at least one detail item needs to be added with an amount over \$0.

When there are no Detail Items associated with a Funding Request, opening this section will prompt the Applicant to add new Detail Item(s).

If you do not wish to complete Detail Items, you can proceed to the next section without adding any items, but this section will need to be completed before you are able to submit the application.

### **Detail Line Items Table**

- Displays the current Detail Items related to the Funding Request.
- If there is a maximum amount Applicants can request, it will appear below.

- If there is no amount listed, it means there is no maximum.
- The current sum of all Detail Items is shown below the table.
  - a. If there is a maximum amount allowed, your total must be equal to or under the max value shown.
- To edit or delete, select the Detail Item you wish to make changes to and choose the action you want to take with the buttons below.
- To add more Detail Items, select the “Add” button.

**Detail Items**

**Detail Line Items**

1 of 1 Item • 0 Items selected

<input type="checkbox"/> Amount	<input type="checkbox"/> Reason	<input type="checkbox"/> Detail Item
\$1,000.00	Tuition	

Maximum Request Amount: \$6,000

Total Loan Amount: \$1,000.00

+ Add
Edit Selected
Delete Selected

Save and Continue
Save and Exit

**Adding Detail Line Items:**

1. Select “Add” button
2. To add more than one Detail Item click the “Add” button and additional cards will appear for multiple entries.
3. Instructions for entering this Funding Request’s Detail Items appear at the top of the Add Page.
4. To remove an un-needed Detail Item card, click the “Remove” button.
5. Entering Detail Item
  - a. Choose Reason
  - b. Item description (optional)
  - c. Amount (format \$0.00)
  - d. \*\*If additional Recipients are allowed for this Program, you can relate them to the Detail Items.
6. Once desired entries have been added, hit “Save”. Newly entered Detail Item(s) will be displayed on the Detail Item Table.

**Add Detail Item**

List the total amount shown on each of your documents or each student.  
 Ensure that the total of detail line items is not greater than the max allowed for this program.  
 Max Allowed: [\\$6,000](#)  
 Total Funding Request Amount: [\\$1,000.00](#)

---

**Detail Items**

\* Reason  
 Tuition

Item  
 Fall Semester

\* Amount  
 \$1,000.00

Recipient  
 USCG Child Member

**Remove**

**+ Add**

Previous Save

**Editing Detail Line Items:**

**Detail Items**

**Detail Line Items**  
 1 of 1 Item - 1 item selected

<input checked="" type="checkbox"/>	Amount	Reason	Detail Item
<input checked="" type="checkbox"/>	\$1,000.00	Tuition	

Maximum Request Amount: [\\$6,000](#)  
 Total Loan Amount: [\\$1,000.00](#)

**+ Add** **Edit Selected** **Delete Selected**

Save and Continue Save and Exit

1. From the Detail Item Table, select the Item you want to edit.
2. Select "Edit Selected" button.
3. Make desired changes.
4. Ensure the edited amount is not going to make the total greater than the max allowed on the application (if applicable).
5. To save edits, click "Save" and return to the Detail Item Table.

If you don't wish to make changes and want to return, click "Previous"

Max Allowed: [\\$6,000](#)  
 Total Amount: [\\$1,000.00](#)

\* Reason  
 Tuition

Detail Item  
 Fall Tuition

\* Amount  
 \$1,500.00

Detail Recipient  
 USCG Child Member

Previous Save

## Deleting Detail Items:

Amount	Reason	Detail Item
\$1,000.00	Tuition	

Maximum Request Amount: \$6,000  
Total Loan Amount: \$1,000.00

+ Add Edit Selected Delete Selected

Save and Continue Save and Exit

1. To delete Detail Items, select the Item you would like to delete from the table.
2. Click “Delete Selected”
3. Confirm the deletion of the Item or cancel action and keep Item

\*\*If you delete the only remaining Detail Item, this section will no longer be completed until another item is added with an amount greater than \$0.00

Are you sure you want to remove this detail line item?

Item: Fall Tuition  
Amount: \$1000.00  
Reason: Tuition  
Recipient (if applicable): USCG Child Member

\* Choice  
 Yes, delete  
 No, don't delete

Save

## Detail Item Final Navigation:

When finished with the Detail Item section, you can proceed to the next section or return to the Funding Request Page.

- To go to the next section, select “Save and Continue”.
- To exit and return, click “Save and Exit”.

## Documents

Requirements listed in the table as **Open** are currently due for your application. Please submit a document to them in order to continue your application process.

Requirements listed as **Submitted** are currently awaiting review. You may update them if you wish by submitting another file. When all Requirements have a status of submitted, this section is considered complete.

## Uploading Documents:

1. For each Requirement, follow the instructions to upload the correct type of document(s) required for each.
2. To upload document(s), select the Requirement and click the “Complete Requirement” button.

Requirements below listed as **Open** are currently due for your application(s). Please submit a document to them in order to continue your application process.

Requirements listed as **Submitted** are currently awaiting review. You may update them if you wish by submitting another file.

<input checked="" type="checkbox"/> Requirement Name	Instructions	Status	Document Submission Status
<input checked="" type="checkbox"/> ID Card	Upload the front of your USCG ID - military ID, dependent ID, Auxiliary ID, etc. Include the back if it shows expiration date or other key details.	Open	
<input type="checkbox"/> Documentation of Costs	Upload a document for each of the detail items on the previous screen. Depending on the program, this can include receipts, bills, estimates, or fee lists. It should include the date, a description of the Item(s), the total cost, and your name (except for fee lists).	Open	
<input type="checkbox"/> Personal Budget	Fill out <b>CGMA's form</b> with your monthly income and expenses or provide a budget you made with a financial counselor.	Open	
<input type="checkbox"/> Proof of Enrollment	Provide proof of the student's enrollment, such as a certificate of enrollment with current courses listed or a letter from the Registrar's Office. The document must show the student's	Open	

3. Browse for file(s) or drop files on the upload component. You are allowed to upload multiple files on a single Requirement. When a file is successfully attached, “Document Uploaded” message will appear.
4. Add any optional comments you have.
5. Click “OK” to save and go back to the Requirement Table.

If you don't want to upload a document at this time, you can also click “OK” and return to the Requirement Table.

Instructions for Upload of: ID Card

Upload the front of your USCG ID - military ID, dependent ID, Auxiliary ID, etc. Include the back if it shows expiration date or other key details.

Type: ID Card

Upload Documents

Or drop files

Document uploaded

Comments

After uploading one or more documents, the Requirement will now show with a status of Submitted.

**Document Upload for Requirements**  
4 of 4 items • 0 items selected

<input type="checkbox"/> Requirement Name	Instructions	Status	Document Submission Status
<input type="checkbox"/> ID Card	Upload the front of your USCG ID - military ID, dependent ID, Auxiliary ID, etc. Include the back if it shows expiration date or other key details.	Submitted	✔
<input type="checkbox"/> Documentation of Costs	Upload a document for each of the detail items on the previous screen. Depending on the program, this can include receipts, bills, estimates, or fee lists. It should include the date, a description of the item(s), the total cost, and your name (except for fee lists).	Open	
<input type="checkbox"/> Personal Budget	Fill out <b>CGMA's form</b> with your monthly income and expenses or provide a budget you made with a financial counselor.	Open	
<input type="checkbox"/> Proof of Enrollment	Provide proof of the student's enrollment, such as a certificate of enrollment with current courses listed or a letter from the Registrar's Office. The document must show the student's	Open	

**Deleting a Document:**

If you add a document and want to delete it from the Requirement:

1. From the Requirement Table, select the Requirement that you want to remove the document from.
2. View table of documents related to the Requirement.
3. Select the one you want to delete and click "Delete Selected" button.
4. You can either upload a new document or return to Requirement Table without uploading anything else by clicking "OK".

\*\*If you remove the only document related to a Requirement and don't upload a replacement, the Requirement will return to the Open status.

**Instructions for Upload of: ID Card**  
Upload the front of your USCG ID - military ID, dependent ID, Auxiliary ID, etc. Include the back if it shows expiration date or other key details.

**Type:** ID Card

Upload Documents  
 Or drop files

Comments

**Documents Uploaded**  
1 of 1 item • 1 item selected

<input checked="" type="checkbox"/>	Title	Created	File Type
<input checked="" type="checkbox"/>	USCG ID	11/21/2024, 02:05 AM	JPG

**Document Final Navigation:**

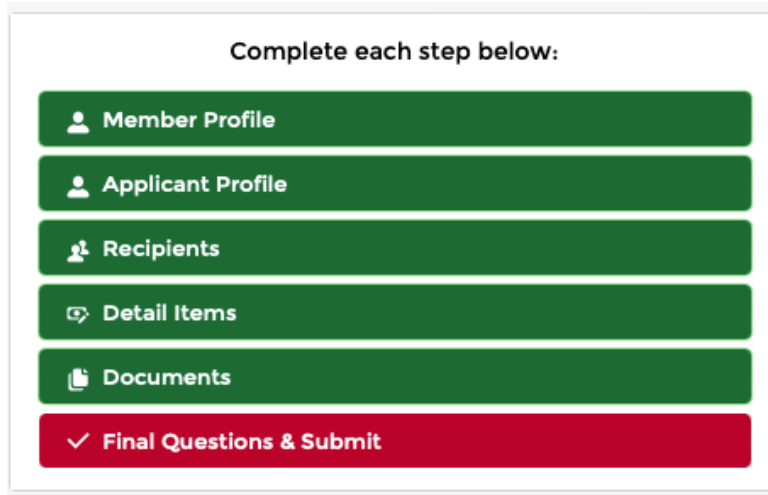
1. To exit and return, click "Save and Exit".



When finished with the Document section, return to the Funding Request Page.

## Final Questions and Submit

If all required sections are completed, they will appear as green and the Final Questions and Submit button will now be red.



## Final Questions

CGMA is dedicated to a policy of fair treatment. At all times, CGMA will provide an environment that promotes dignity, respect, fairness, and inclusion. These are essential ingredients to the sustinment of operational excellence, a positive office climate and a healthy work environment. All CGMA personnel and representative will comport themselves in accordance with all Coast Guard civil rights policies at all times. All CGMA clients will adhere to this policy in their interactions with CGMA HQ personnel and CGMA Representatives.

### Rep Site

Choose the CGMA Rep Site most convenient to you to process your application [Find My Representative](#)

\* Rep Site

USCG Cyber Command

### Comments

Is there any other information you would like to add to this request?

### Disbursement Method

[Learn more about your options](#)

Bank Account Number: 9000

Routing Number: 0211

\* Method

ACH Bank Transfer

Enter New ACH Information

### Repayment

[Learn about repayment methods](#)

\* How much can you afford to pay per month?

\$100

As part of your application for assistance, you will automatically be enrolled to receive important updates, notifications, and information via email and text message. These communications are intended to keep you informed about the status of your application, next steps, and other relevant CGMA updates. After your application is complete, you may unsubscribe at any time.

[Cancel](#)

[Save and Exit](#)

[Next](#)

1. Select Rep site from picklist
2. Add any additional comments (optional)

**Disbursement Method:**

If Funding Request is a Loan, you will fill out the Disbursement Section

1. ACH Bank Transfer Method

- a. If there’s previous ACH Bank Info on record for the Applicant, it will display.
- b. No action is needed if you want to use the existing Bank Account and Routing Numbers
- c. Enter new ACH information by checking the “Enter New ACH Information” checkbox and filling out the banking fields.
- d. If there’s no ACH Bank on record, you will be required to enter your banking information

▼ Disbursement Method

[Learn more about your options](#)

\* Method

ACH Bank Transfer

Enter New ACH Information

\* Bank Account Number

\* Confirm Bank Account Number

\* Routing Number

2. Zelle

- a. If there’s a previous Zelle email on record, it will populate in the email field.
- b. You can choose to use it by confirming the email in the “Confirm Zelle Email” field below.
- c. Or use a new Zelle email and enter it twice to confirm.

▼ Disbursement Method

[Learn more about your options](#)

\* Method

Zelle

\* Zelle Email

cgmadependent@gmail.com

\* Confirm Zelle Email

cgmadependent@gmail.com

**Repayment:**

If Funding Request is a Loan, you will fill out the Repayment Section. Enter how much you can afford to pay back each month.

**Command Information:**

If Member is Active Duty, Civilian Employee or Reserve, the total amount request is over \$3,000, and the Funding Request Type is a Loan or Grant, the Commanding officer’s, OIC’s, flotilla commander’s, or civilian supervisor’s information is required.

▼ Command Information

Provide the following information about your Commanding officer, OIC, flotilla commander, or civilian supervisor.

\* First Name

\* Last Name

Rank

--None--

\* Email

you@example.com

**Other Society:**

If Member Type is DoD Member, Other Society picklist is available (optional).

Other Society --None--
---------------------------

**Questions Navigation:**

- Cancel: Exit without saving changes
- Save and Exit: Return the Funding Request Page
- Next: Send to certification(s) to review and accept before submitting application

**Certifications:**

1. Review the certifications and agree to each by checking the corresponding box.
2. Be sure you have no further changes to make, as you cannot edit your application once it's been submitted.

**Certifications**  
*Please certify each statement below by checking the boxes below.*

---

I understand that this is a loan for costs incurred due to a disaster or storm. It is intended for the purchase of food and clothing, replacement of appliances, temporary housing, transportation, emergency home repairs, or other emergency needs. I understand that if I want to convert this disaster loan to a grant, I must submit a separate application within 21 days after landfall/occurrence in cases where the only loss was food or 90 days in cases with other damage or losses (possibly including food loss).

I certify that I or my immediate family incurred the losses in this request. I agree to voluntarily reimburse CGMA if any other source reimburses me for these losses in the future.

I affirm that all information provided in this application is accurate to the best of my knowledge. I authorize CGMA to verify the details provided, including my credit and employment history. I understand that failure to provide requested information or misstating any facts may result in denial of my request. CGMA reserves the right to deny any requests.

I understand that CGMA is an independent private entity, not part of the U.S. Government. This application form, therefore, is not subject to the Privacy Act (5 U.S.C. 552a). Information provided on this application may be provided by CGMA to the Coast Guard when deemed necessary.

If given an interest-free loan, I am fully aware that any failure to adhere to the agreed-upon repayment schedule may escalate my account to a collection agency, thereby significantly affecting my creditworthiness and financial standing.

Please Note: Once you submit your application, you will no longer be able to make any further changes.

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After submission, the next step is to contact your CGMA Representative to proceed with the application process. For routine cases, please allow up to 3 business days for processing.