

**ADMINISTRATIVE CHECKLIST FOR PROCESSING  
FY12 REENLISTMENT BONUS (EARB-CP)**  
(to be completed by unit's Admin section)

\_\_\_\_ SNM has been approved for a 4 year reenlistment. (SNM may reenlist for no less than 3 years to ensure reenlistment does not contractually obligate him/her beyond 10 sat years if a Corporal or 14 sat years if a Sergeant)

\_\_\_\_ A current fiscal year Bonus Control Number (BCN) was issued by CMC (RCT) via TFRS.

\_\_\_\_ If reenlisting for the MGIB-SR Kicker, a current fiscal year Kicker Control Number (KCN) was issued via TFRS.

\_\_\_\_ Written agreement has been initialed and signed by all required parties.

\_\_\_\_ Career Planner has annotated block 8 of DD Form 4 with the appropriate entry as specified in the current REB MARADMIN: "I agree to continue affiliation with RUC XXXXX MCC XXX for 3 years from the date of reenlistment for the incentive listed. I understand that failure to meet the requirements for affiliation will result in a prorated recoupment and may be grounds for administrative separation from the Marine Corps."

\_\_\_\_ Report Bonus PEF code Z9 via UD for the reenlistment bonus  
Report Bonus PEF code RE via UD for the reenlistment bonus and LATMOV.

\_\_\_\_ Report TTC 900 001 for bonus payment. Please note, all Marines will receive \$10,000. If Sergeant or Staff Sergeant, CMC (RIT) will contact DFAS for the additional \$5,000. If a Marine does not receive the full amount after 30 days, contact CMC (RCT) at 703-432-9771. If retraining under the LATMOV program, SNM receives payment after training is complete.

\_\_\_\_ Report the following for a MGIB-SR Kicker:  
Report TTC 910 000 MGIB SR KICKER INCNT ELIG CD BA  
Report TTC 910 003 \_\_\_\_\_ MGIB SR KICKER INCNT CD RC BASIS CD A CNTL NUM \_\_\_\_\_

\_\_\_\_ Verify Mandatory Drill Start and Stop Dates from the date of reenlistment are reflected correctly in MCTFS per instructions provided in the current EARB MARADMIN.

\_\_\_\_ If SNM reenlists but does not want the bonus, or fails to reenlist within 45 days after approval or by 27 Sep 2012 (whichever is earlier), notify CMC (RCT).

I certify the above steps have been completed. SNO has received payment of the bonus:

\_\_\_\_\_  
Print name and rank of Admin Chief

\_\_\_\_\_  
Print name and rank of CO/I&I

\_\_\_\_\_  
Signature and date

\_\_\_\_\_  
Signature and date

(SEP 2011)

WRITTEN AGREEMENT FOR THE  
FY12 SELECTED MARINE CORPS RESERVE REENLISTMENT BONUS  
(EARB-CP)

1. Eligibility.

a. I am reenlisting with a Primary Military Occupational Specialty (PMOS) listed in the current EARB-CP MARADMIN. \_\_\_\_\_Initial

b. I currently hold the rank of Corporal, Sergeant, or Staff Sergeant; I have not been passed over for promotion to the next higher grade or been reduced to my current grade; I have not been selected to the rank of Gunnery Sergeant. \_\_\_\_\_Initial

c. I am not reenlisting to qualify for a civilian position where membership in the Guard or Reserve is a condition of employment (temporary assignment excluded). \_\_\_\_\_Initial

2. Obligation.

a. I will serve satisfactorily as prescribed by the appropriate regulations of the United States Marine Corps, for a period of 36 months in the following BIC \_\_\_\_\_ MOS \_\_\_\_\_, RUC \_\_\_\_\_, City \_\_\_\_\_, State \_\_\_\_\_, Unit \_\_\_\_\_, unless excused for the convenience of the government. \_\_\_\_\_Initial

b. If I incur a period of authorized non-availability (as determined by the Commander, Marine Forces Reserve), I will extend my period of service obligation in the SMCR in order to fulfill my 36-month obligation. \_\_\_\_\_Initial

c. I understand that I will have a Mandatory Drill Stop Date reported to reflect 3-years from the date of reenlistment. \_\_\_\_\_Initial

d. I further understand that if any of the following occur it will be considered a breach of my obligation, my incentive will be recouped at a prorated amount, and I could be administratively separated from the Marine Corps Reserves;

(1) I fail to fulfill my obligation. \_\_\_\_\_Initial

(2) I fail to participate satisfactorily. \_\_\_\_\_Initial

(3) I execute a lateral move without prior written approval of CMC (RCT). \_\_\_\_\_Initial

(4) I transfer to the Individual Ready Reserve. \_\_\_\_\_Initial

(5) I execute an inter-unit transfer without CMC (RCT) approval. \_\_\_\_\_Initial

(6) I perform Active Duty Operational Support with a unit other than my own for a period greater than 90 cumulative days per FY without prior written approval of MARFORRES. \_\_\_\_\_Initial

(7) I augment to the regular component or the Active Reserve program. \_\_\_\_\_Initial

(SEP 2011)

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(8) I become an Individual Mobilization Augmentee (IMA) except upon unit deactivation as a result of Force Structure Review Group (FSRG) or Base Realignment and closure (BRAC). \_\_\_\_\_ Initial

3. Recoupment. I understand that this incentive will be recouped at a prorated amount and recoupment will be computed as follows:

a. The number of months served satisfactorily during the affiliation period for which the bonus was paid multiplied by the monthly bonus amount (\$277.77 for a \$10,000 bonus or \$416.67 for a \$15,000 bonus) then subtract this amount from the total bonus paid. \_\_\_\_\_ Initial

b. If recoupment occurs I am no longer entitled to future incentives.  
\_\_\_\_\_ Initial

c. Recoupment will not occur if I accept a commission or an appointment in the Selected Reserve and have served 1 year of the incentive obligation; or I am required to transfer to the IRR due to a unit deactivation, redesignation, disability, or I am twice passed for promotion to the next higher grade. \_\_\_\_\_ Initial

4. Payment. I understand that this incentive is a lump sum payment of \$10,000 if I am a Corporal, or \$15,000 if I am a Sergeant or Staff Sergeant at the time of reenlistment for this bonus. If retraining in conjunction with the LATMOV program, I will not receive payment until retraining is complete. \_\_\_\_\_ Initial

5. Understanding. I understand each of the statements above and understand that they are intended to constitute all promises or commitments made to me in conjunction with my reenlistment. I have been issued a Bonus Control Number (BCN) \_\_\_\_\_, and I further understand that without a BCN I am not entitled to this incentive. \_\_\_\_\_ Initial

6. I may choose to reenlist in the SMCR without a bonus provided under this program. If so, none of the aforementioned provisions apply. \_\_\_\_\_ Initial

\_\_\_\_\_  
PRINTED NAME AND GRADE  
OF MARINE

\_\_\_\_\_  
SIGNATURE OF MARINE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME AND GRADE OF  
CAREER PLANNER

\_\_\_\_\_  
SIGNATURE OF CAREER  
PLANNER

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME AND GRADE  
OF WITNESSING OFFICER

\_\_\_\_\_  
SIGNATURE OF WITNESSING  
OFFICER

\_\_\_\_\_  
DATE