



# NMI SETTLEMENT FUND

POST OFFICE BOX 501247, SAIPAN, MP 96950

## APPLICATION FOR IDENTIFICATION CARD

*(Please type or print)*

**To the Applicant:**

You must present valid identification with your completed form. You must also sign the back of the card and provide a 1" x 1" photo of yourself before laminating your card.

The Identification card is a valid ID, and may serve for any other purpose.

Thank you

Mark One Box:     Retiree     Surviving Spouse     Disability Annuitant

NAME:                      Last, First Middle		SOCIAL SECURITY NUMBER:	
DATE OF BIRTH:                      (Month/Day/Year)		WEIGHT	HEIGHT
MAILING ADDRESS:                      (PO Box or Street Name)			
GENDER: <input type="checkbox"/> Male <input type="checkbox"/> Female		LAST DUTY STATION OR RESIDENCE IN THE CNMI:	
		<input type="checkbox"/> Saipan	<input type="checkbox"/> Rota <input type="checkbox"/> Tinian
RETIREMENT DATE/ DATE BENEFIT BEGAN:		SIGNATURE/DATE:	
		(X)	

SF-1G (REV 01/2015)