APPLICATION FOR TRAINING – CADET INSTRUCTORS CADRE OFFICERS

Corps/Sqn Priority:

Last Name:		First Name & Initials:					Rank:	Pay Level:		
Home Address: City/		Province:		Posta			Phone Number:			
Email:	SN: D			e of Birth: Month Year			Gender:	nder: MOC: □91A □92A □93A		
Corps/Squadron:	Corps/Squadron Location: UIC: AA						Present Appointment:			
Training applied for:					Date(s):					
Have you completed prerequisite training IAW CATO 24-01? □ Yes □ No										
Check Course(s) Completed: ¬ Doo ¬ Doo										
□ BOQ – date:	CQ -	□ CQ – date:			Fl	Flat Water – date:				
☐ MOC – date:	Course – date:					Canoe Instructor – Water – date:				
\Box JOLC – date: \Box SHARP – date				□ Absei			– date:			
LTQ – date:										
Method of Travel	PMC Licer	nce #	F	Bus	<u> </u>	Comn	nercial Air	Pa	assenger	
(indicate which you request):										
I cannot depart my home unit earlier than hrs on (date)										
Note: Candidates (other than CAL) must arrive at RCIS NLT 2030 hrs on the day prior to course start date.										
	Signature of Applicant:									
(CO to check): $\Box R d$	ecommen	ıded 🗆 N	Not Re	ecom	ımen	ded		-		
e	Signature of Commanding Officer:									
HQ USE ONLY										
Elemental Office	• · · · •		1							
□ Approved (meets prerequisites) □ Not Approved										
Date: Signature: (Cdt #123 to RCIS)										
Attendance Confirmed – Date: Signature:										
<u>RCIS</u>										
Loaded Wait Listed										
Date: RCIS Authorized:										