

PROTECTED A (when completed)

**REGIONAL CADET INSTRUCTOR SCHOOL (PACIFIC)**  
**CANDIDATE BIOGRAPHY**

Service Number	Rank	Last Name	Given Name
Unit Number	Unit Location	Position at Unit	
DOB (D/M/Y)	Gender <input type="checkbox"/> M <input type="checkbox"/> F	Enrolment Date (D/M/Y)	Date of Last Promotion (D/M/Y)
Home Address (include postal code)			
Home Telephone (    )	Business Telephone (    )	E-Mail Address	
Allergies or other medical conditions you wish the staff to be aware of:			
Military experience (include positions held and length of time, positions anticipated in future)			
Cadet experience (include courses attended and positions held)			
Current qualifications (First Aid, RSO, CYA, RRT, Tender Charge, Pilot's Licence, Abseil, Canoe, etc)			
Civilian Occupation or Area of Study			
Any other information you can provide that may be useful to your instructional staff			
Date	Signature		

PROTECTED A (when completed)