

CADET STAFF APPLICATION

I. PERSONAL DATA

LAST NAME-FIRST NAME-MIDDLE INITIAL	CAPSN	DATE
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GRADE	CURRENT POSITION
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II. POSITIONS

<input type="checkbox"/> Cadet Commander	<input type="checkbox"/> Flight Commander	<input type="checkbox"/> Administrative Officer
<input type="checkbox"/> Deputy Cadet Commander	<input type="checkbox"/> Flight Sergeant	<input type="checkbox"/> Public Affairs Officer
<input type="checkbox"/> First Sergeant	<input type="checkbox"/> Element Leader	<input type="checkbox"/> Logistics Officer

III. EXPERIENCE

List your leadership experience as well as anything you feel would affect the board.

IV. QUALIFICATIONS

Describe why you feel you would be best for the position.

UNIT CHARTER NO.	SIGNATURE OF REQUESTOR	TYPED NAME AND GRADE OF REQUESTOR	
APPROVED	SIGNATURE OF CADET COMMANDER	DATE	DENIED
APPROVED	SIGNATURE OF SQUADRON CMDR.	DATE	DENIED

V. ACTION BY APPROVING HEADQUARTERS *(Use reverse side of form if additional space is required)*

APPROVED **HOLD** **DENIED**