

# CADET SPECIAL REQUEST

(Date Submitted)

From: Cadet  / C   Golf /  0  
Subj: Special Request (Company) (Room #)

1. I respectfully request approval for:

☐ a. Special Liberty from  to

☐ b. Weekend Liberty [Short or Long] from  to

If "Earned Weekend," specify how:

Address and Phone(s) where I can be contacted:

c/o:

Address:

Phone(s):

☐ c. Exchange of Duty with Cadet  1 / C  of  Company  
who will stand my  duty on

Signature of cadet taking duty cited above: \_\_\_\_\_

☐ d. Other:

2. I am presently on: [Check all that apply]

☐ Commandant of Cadets List

☐ Regimental Commander's List

☐ Dean's List

☐ Physical Fitness Evaluation List

3. My most recent TGPA is

4. My status is: [Check all that apply]

☐ Academic Probation

☐ Suitability for Service Probation

☐ Remedial PFE

☐ Academic Suspended Disenrollment

☐ Conduct Restriction

☐ Conduct Suspended Disenrollment

Medical: ☐ NFFD ☐ FFL ☐ FFFD

5. **SIGNATURE OF REQUESTER:** \_\_\_\_\_

Comments:

Attachments? [Yes/No]

6. **Routing** It is your responsibility to route this request via your military chain of command.

a. First route this request as indicated in 7. (as per page 2), ONLY if this request affects your academic or PE schedule. IF NOT, then route directly to your military chain of command as indicated in 8. (as per page 2).

b. If this is an "emergent situation" then immediately hand carry the request via your military chain of command.

Name  /C Date: 

CGACAD 8 CCA (09/13/07)

7. **Endorsements** If this request involves missing Academic or Physical Education classes, route this request first to you Academic Advisor, P.E. Instructor(s), and Academic Instructor

a. **Academic Advisor.** Name  Dept:  Phone:

"It is my opinion that this cadet [CAN / CANNOT] afford to miss classes and [CAN / CANNOT] make up the missed classwork."

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- b. **Instructors Endorsements.** If this request involves missing Academic classes, route this request via each of your instructors that is affected. **[NOTE: It is your responsibility to develop an appropriate makeup / recovery plan.]**

		Signature	Remarks
<input type="text"/>	<input type="text"/>	Approval / Disapproval	
(class)	(instructor name)		
<input type="text"/>	<input type="text"/>	Approval / Disapproval	
(class)	(instructor name)		
<input type="text"/>	<input type="text"/>	Approval / Disapproval	
(class)	(instructor name)		
<input type="text"/>	<input type="text"/>	Approval / Disapproval	
(class)	(instructor name)		
<input type="text"/>	<input type="text"/>	Approval / Disapproval	
(class)	(instructor name)		
<input type="text"/>	<input type="text"/>	Approval / Disapproval	
(class)	(instructor name)		

- c. **Chain of Command Endorsement** Route via chain of command:

a. 3/c Supervisor Recommend [Approval / Disapproval] \_\_\_\_\_ / \_\_\_\_\_ (initials / date)  
Remarks:

b. 2/c Supervisor Recommend [Approval / Disapproval] \_\_\_\_\_ / \_\_\_\_\_  
Remarks:

c. Division Officer Recommend [Approval / Disapproval] \_\_\_\_\_ / \_\_\_\_\_  
Remarks:

d. Department Head Recommend [Approval / Disapproval] \_\_\_\_\_ / \_\_\_\_\_  
Remarks:

e. Company Executive Officer Recommend [Approval / Disapproval] \_\_\_\_\_ / \_\_\_\_\_  
Remarks:

f. Company Commander Recommend [Approval / Disapproval] \_\_\_\_\_ / \_\_\_\_\_  
Remarks:

g. Company Officer Recommend [Approval / Disapproval] \_\_\_\_\_ / \_\_\_\_\_  
Remarks:

h. **FINAL APPROVING AUTHORITY**

Returned: [Granted / Not Granted] (Signed / Dated) \_\_\_\_\_ / \_\_\_\_\_

Remarks:

Note: After Final Approval Route to Company XO for Excusal System Entry Review

(initials / date)

8. **Excusal System Entry** Is excusal from Routine of the Day needed? [Yes / No ] \_\_\_\_\_ / \_\_\_\_\_

If Yes, entered into the Electronic Excusal System by Company XO? [Yes / No ] \_\_\_\_\_ / \_\_\_\_\_

**CC:** (1) Company OOD