CADET COUNSELING FORM For use of this form see Chapter 11 of the White Book			
RECORD OF CADET COUNSELING/ CONDUCT REVIEW		DATE:	
1. NAME (Last, First MI.)	2. CWID	3. Unit	4. Class
5. REASON FOR COUNSELING o Cadet Counseling	o TAC Counseling	o CRB o	Suitability
o CLASS I OFFENSE	o 50% Annual Demerits		
o CLASS II OFFENSE	o 75% Annual Demerits		
o 50% Semester Demerits	o 100% Annual Demerits	S	
o Outstanding Performance	o Other		
6. SUMMARY OF COUNSELING / BOARD ACTION CONTINUE ON B ACK 7. SUITABILITY BOARD RECOMMENDED YES O NO O 8. RECOMMENDED FOR CRU YES O NO O 9. TAC AND CADET HAVE PHONECON WITH PARENTS AT 75% AND 100% OF SEMESTER OR ANNUAL DEMERIT LIMITS YES O NO O UNABLE TO CONTACT / LEFT MESSAGE O 10. CADET AGREEMENT WITH COUNSELING YES O NO O			
11. CADET STATEMENT CONCERNING COUNSELING- REQUIRED. (Cadet <i>must</i> comment on the understanding of this counseling.)			
11. NAME OF COUNSELOR	12. SIGNATURE		
TI. MAINE OF GOONSELOR	12. SIGNATURE		
13. NAME OF CADET	14. SIGNATURE		
10. IVAIVIE OF GADET	14. SIGNATURE		
15 NAME OF CARET COMMANDED	16. SIGNATURE		
15. NAME OF CADET COMMANDER	10. SIGNATURE		