Exemption to Policy Form

Cadet Name (Last, First): _____

Date of Request: _____ Classification (EX: Senior, Freshman): _____

Unit (EX: Alpha Company 1st Platoon): _____

On the lines below, provide the specific regulation(s) you are requesting to be exempted from:

_____

_____

_____

_____

_____

_____

On the lines below provide your justification for being exempt from the above stated regulation:

_____

_____

_____

_____

_____

_____

Section Below for Staff Use Only

Platoon Leader Recommendation: Approve / Deny Signiture:_____

Company Commander Recommendation: Approve / Deny Signature: _____

Cadet Training Officer: _____

Corps Commander: _____

Exemption Request: Approved / Denied