

Special Request / Authorization

PRIVACY ACT STATEMENT

The principal purpose of the information is to enable you to make known your desire for one of the four items listed or for some other special consideration or authorization. The information will be used to assist Midshipmen of the NROTC Unit Virginia Tech in determining your eligibility for and approving or disapproving the special consideration or authorization being requested. Completion of the form is mandatory; failure to provide required information may result in delay in response to or disapproval of your request.

NAME	RANK
COMPANY	DATE OF REQUEST
PLATOON	ROOM

NATURE OF REQUEST

LEAVE / LIBERTY
 PRO LAB
 NAVY CLASS
 STUDY HOURS
 OTHER BELOW

NO. DAYS REQUESTED	FROM (Date & time)	TO (Date & time)
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NROTC EVENTS AFFECTED

CONTACT INFORMATION	Telephone Number
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REASON FOR REQUEST

APPROVED BY CORPS:
 YES
 NO
 PENDING

SIGNATURE OF APPLICANT

RECOMMEND APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO	SIGNATURE AND RANK/RATE/TITLE/DATE
RECOMMEND APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO	SIGNATURE AND RANK/RATE/TITLE/DATE
RECOMMEND APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO	SIGNATURE AND RANK/RATE/TITLE/DATE
RECOMMEND APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO	SIGNATURE AND RANK/RATE/TITLE/DATE
RECOMMEND APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO	SIGNATURE AND RANK/RATE/TITLE/DATE
RECOMMEND APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO	SIGNATURE AND RANK/RATE/TITLE/DATE
<input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED	SIGNATURE

REASON FOR DISAPPROVAL

COMMENTS: