NAVAL RESERVE OFFICERS TRAINING CORPS UNIT

UNIVERSITY OF MICHIGAN

ANN ARBOR, MICHIGAN 48109

ONE TIME EVENT WAIVER

Date:

Name: Platoon/squad:

**Requested for:**

1. Leadership Lab: Date of event:

 2. Battalion PT: Date of event:

 3. Other Activity: Date of event:

**Reason for request:**

**Recommendation: Yes/No Reason if no**

SQD LDR:

PLT CDR:

BN XO:

BN CO:

Unit Staff Advisor:

**Decision Yes/No Reason if no**

Bottom Liner:

Signature:

Original to student

Copy to: ADMIN