Date: __________
Name: _______________  Platoon/squad: __________________________

Requested for:  
1. Leadership Lab: __________
2. Battalion PT: __________

Reason for request:
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

Initial:
Unit Staff Advisor:  Approved __________  Not Approved: __________
Unit XO:  Approved __________  Not Approved: __________

Reason for disapproval:
_________________________________________________________________
_________________________________________________________________

Original to student
Copy to AMOI, Advisor and Chain of Command