

# MOTIVATION PHASE AGREEMENT

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**CADET CANDIDATE  
ACHIEVEMENT**

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**AIRMAN BASIC**

1. CANDIDATE'S LAST NAME, FIRST NAME, MIDDLE NAME		2. CANDIDATE'S SOCIAL SECURITY NUMBER	
3. CANDIDATE'S ADDRESS (STREET NUMBER/PO BOX, CITY, STATE, ZIP)		4. UNIT NAME AND CHARTER NUMBER  <p style="text-align: center;">Nellis Composite Squadron NV-069</p>	
5. TELEPHONE NUMBER		6. CANDIDATE'S E-MAIL ADDRESS	
7. ASSIGNED MENTOR'S NAME AND TELEPHONE NUMBER		8. UNIT MAILING ADDRESS  <p style="text-align: center;">7617 Constantinople Ave Las Vegas, NV 89129</p>	
9. NAME AND CONTACT INFORMATION FOR THE DUPLY COMMANDE FOR CADETS  <p style="text-align: center;">Lt Col Jay Roberts Jay.Roberts@nvwg.cap.gov 702.596.4781</p>		10. NAME AND CONTACT INFORMATION FOR THE SQUADRON COMMANDER  <p style="text-align: center;">Lt Col David Jadwin David.Jadwin@nvwg.cap.gov H: 702.207.2559 C:702.860.3050</p>	

## PROSPECTIVE MEMBER AGREEMENT TO COMPLETE APPLICATION

Statement	Proposed Date	Candidate's Initials
The prospective cadet member named herein intends to complete all requirements for membership candidate application on or before the date indicated.	INDICATE DATE ⇒	
11. CANDIDATE'S SIGNATURE _____ DATE _____	12. MENTOR'S SIGNATURE AND GRADE _____ DATE _____	

## APPLICATION REQUIREMENTS

Item	Date	Staff Initials
<input type="checkbox"/> Attend three consecutive meetings. _____		
<input type="checkbox"/> Complete CAP Form 15, 2 copies, all with original signatures from candidate & parents. <i>Included in the "Cadet Member Welcome Packet."</i>		
<input type="checkbox"/> Complete Health certificate, if required to determine extent of participation in CAP activities. <i>(See page 2 of CAPF 15)</i>		
<input type="checkbox"/> Complete NCS New Member Information Form and Cadet Agreements <i>Included in the "Cadet Member Welcome Packet."</i>		
<input type="checkbox"/> Membership dues of <b>\$30.00</b> payable to <b>CAP</b> . <b>\$25.00</b> payable to <b>NCS CAP</b> .		

**United States Air Force Auxiliary – Civil Air Patrol Cadet Oath:** "I pledge that I will serve faithfully in the Civil Air Patrol Cadet Program, and that I will attend meetings regularly, participate actively in unit activities, obey my officers, wear my uniform properly, and advance my education and training rapidly to prepare myself to be of service to my community, state, and nation."

Item	Date	Staff Printed Name and Grade	Staff Signature
Application Reviewed By Membership Board			
Individual Personnel File Created			

## APPLICANT HAS COMPLETED THE MOTIVATION PHASE AND IS ELIGIBLE FOR GRADE OF CADET AIRMAN BASIC

SIGNATURE AND GRADE OF CADET COMMANDER _____ DATE _____	SIGNATURE AND GRADE OF DEPUTY COMMANDER FOR CADETS _____ DATE _____
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