



HEADQUARTERS
North Dakota Wing Civil Air Patrol
 P.O. Box 608 Bismarck, North Dakota 58502



Date

MEMORANDUM FOR: ND/CC

FROM: _____ Squadron

SUBJECT: Appointment of CAP Instructor Pilot.

1. Request the following member(s) of this squadron be approved as CAP Instructor Pilot. Member has been fully briefed in the unique responsibilities of a CAP Instructor pilot. Appropriate documentation is attached.
2. This roster must be updated annually.

	NAME	GRADE	CAP ID #
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

Squadron Commander Signature

1st Ind:
TO: ND/DO

Date

1. Applicants records have been reviewed. Concur with recommendation of the following applicants:
 - a. All
 - b. All except: _____

ND/DO or designee

2nd Ind:
TO: ND/CC

Date

Approved/Disapproved

K. WALTER VOLLMERS Col., CAP
Commander

Cc:
ND/DO
Sq/DO