Office of the Commandant Marion Military Institute Marion, Alabama

Subject: College Leave/Pass			Today's Date:		
To: Commandant of Cadets			Student Number:		
It is requested that the undersigned cadet be granted leave					
Cadet:	Cadet Information (Please use Black or Blue Ink Only)				
Barracks			Company: Room Number:		
From (Date)			To (Date)		
From(Hours)			To (Hours)		
			I will be traveling to following location:		
List a Complete Address (Street, City, State, and ZIP) in the above space					
	wing number: List a Cellular	/Mob	ile/Home/Landline Phone I		
Restriction				Initials	
I am not on any duty roster be it guard detail, honor guard or company duty officer					
I am in no way restricted to campus be it for disciplinary actions.					
Provide reason for request in space below: use back for addition information as needed.					
Forly Polooco Instructors Sign Off					
Early Release – Instructors Sign-Off					
I have informed the instructors below that I will be absent from class on the dates indicated above:					
1. Instructors	Course	I	nstructor's initials	Excused [] Unexcused []	
2. Instructors	Course		Instructor's initials	Excused [] Unexcused []	
3. Instructors	Course		_Instructor's initials	Excused [] Unexcused []	
4. Instructors	Course		Instructor's initials	Excused [] Unexcused []	
5. Instructors	Course		Instructor's initials	Excused [] Unexcused []	
Instructor Comments:					
Cadet Leadership Approval					
Leaders Name (Please Pr		caa	Position	Initials	
1.		First Sergeant			
2.			Company Commander		
FOR USE OF THE ROTC DEPARTMENT ONLY (ONLY IF GOING TO DRILL)					
APPROVED	Initials	DIS	APPROVED	Initials	
Company TAC Officer:					
APPROVEDInitials DIS		APPROVED	Initials		
Comments:		Please write the time and date. Example (1335hrs 11/17/14)			
	Time Out/Date: Time Out/Date:				