



**OFFICE OF THE COMMANDANT
MARION MILITARY INSTITUTE
MARION, ALABAMA**



CHANGE OF GUARD DETAIL REQUEST FORM

TODAY'S DATE: _____

This form must be completed 48 hours in advance for a weekday change and 72 hours for a weekend change.

FROM: _____
(Cadet's name originally scheduled for duty) (Company)

TO: Assistant Commandant for Support

1. Permission is requested to change with _____

for my scheduled duty as (Circle one) BDO, OD, AOD, CDO

On _____ / _____ / _____
Month Day Year

2. Justification for requested change is: _____

_____.

3. My replacement has a GPA of 2.0 or higher and has no penalty hours. Cadets are reminded that you will not receive credit for penalty hours while on duty.

4. I agree to change. (Replacements information and Signature).

Print name: _____

Signature: _____

Approval

Signatures:

Company Commander
C/ BN S-1
C/ BN S-2
TAC Officer
Commandant's Office