

Cadet Room Conditioning Report

Cadet: _____ Barracks: _____ Room #: _____
 Date: _____

At Time of ARRIVAL: (Make note of any missing or damaged item(s).)

Upon Arrival	Remarks	Items of Issue	Remarks
Door		Bed	
Door Lock		Mattress	
Closet		Desk	
Walls		Chair	
Ceiling		Trash Can	
Windows		Mirror	
Window Lock		Vent(s)	
Shade(s)		Other Item: ((Please list ex. Sink)	
Floors			

Cadet Signature: _____ Company Representative Initials: _____
 Company TAC's Signature: _____

At Time of DEPARTURE: (ALL DAMAGES WILL BE CHARGED TO YOUR ACCOUNT.)

Upon Departure	Remarks	Upon Departure	Remarks
Door		Bed	
Door Lock		Mattress	
Closet		Desk	
Walls		Chair	
Ceiling		Trash Can	
Windows		Mirror	
Window Lock		Vent(s)	
Shade(s)		Other Item: (Please list ex. Sink)	
Floors			

Cadet Signature: _____ Company Representative Initials: _____
 Company TAC's Signature: _____

- * Form to be kept by Company XO.
- * Form will be turned in to the Commandants Office either upon departure or room change.
- * When a cadet changes room this form must be attached to the room change request form