EXECUTIVE PHASE (PHASE FOUR) PROMOTION AGREEMENT

GENERAL IRA C EAKER AWARD

GICEA

| | | | | LIEUTENANT COLONEL | | | | |
|---|-------------------------|--|--------------------------------|---------------------------------|--|-----------------|------------------|--|
| 1. MEMBER'S LAST NAME, FIRST NAME, MIDDLE NAME | | | | 1 | 2. CAP IDENTIFICATION NUMBER | | | |
| 3. MEMBER'S ADDRESS (STREET NUMBER/PO BOX, CITY, STATE AND ZIP CODE) | | | | 4. UNIT NAME AND CHARTER NUMBER | | | | |
| 5. MEMBER'S E-MAIL ADDRESS | | | | 6. MEMBER'S TELEPHONE NUMBER | | | | |
| | | | | | | | | |
| MEMBER AGREEMENT Statement | | | | TO COMPLETE | PLETE AWARD Proposed Date Member Initials | | | |
| The C/Maj named herein shall, to the best of ability, complete all re | | | | uirements for the | 1100 | osca Bate | Weimber initials | |
| General Ira C. Eaker Award o | | • | • | INDICATE DATE ⇒ | | | | |
| 7. MEMBER'S SIGNATURE AND GRA | DATE 8. REPORTING OFFIC | | IAL'S SIGNATURE AND GRADE DATE | | DATE | | | |
| | | | WARD RE | DUIDEMENTS | | | | |
| | | , <i>P</i> | | QUIREMENTS | | | | |
| Item Cadet Physical Fitness Test (CPFT) Refer to CAPP 52-18 | | Result MUST MEET PRESIDENT'S CHALLENGE FITNESS REQUIREMENTS FOR 70 TH PERCENTILE | | | Date | Completed | Print Last Name | |
| Leadership Essay Assignment Per CAPR 52-16, Para. 2-8g (1) | | 300 TO 500 WORD ESSAY GRADED PER CAPR 52-16, FIGURE 2-5 | | | | | / | |
| Leadership Speech Assignment Per CAPR 52-16, Para. 2-8g (1) | | BASED ON ESSAY GRADED PER CAPR 52-16, FIGURE 2-6 | | | | | | |
| SDA Staff Service As Apprentice Under Senior Command, Administration or Public Affairs Officer (See CAPP 52-14) | | ALL ITEMS FOR SDA STAFF SERVICE COMPLETED (SEE CAPP 52-14 FOR DETAILS) | | | | | | |
| Completion of Leadership Academy (COS, RCLS or AFIADL-13) | | E-SERVICES AT WWW.CAP.GOV MUST INDICATE COMPLETION | | | | | | |
| Aerospace Education | | NO REQUIREMENT | | | NO REQUIREMENT | | NO REQUIREMENT | |
| Character Development Forum Participation | | NO REQUIREMENT | | | NO REQUIREMENT | | NO REQUIREMENT | |
| Active Participation in Squadron Activities | | ACTIVITY: | | | | | | |
| CAP Form 50 Completed By Reporting Official | | PRINTED NAME AND GRADE OF REPORTING OFFICIAL | | | | | | |
| Cadet Oath | | RECITE FROM MEMORY—MAY RETEST AS MANY TIMES AS NECESSARY TO ATTAIN 100 PERCENT ACCURACY | | | | | | |
| | | | RE\ | /IEW | | | | |
| Item | | Date Staff Printe | | nted Name and Grade | | Staff Signature | | |
| eServices Updated | | | | | | | | |
| Member's Ira C. Eaker Awai www.cap.gov (NOTE : Require And Requesting The General C | Vearing Grade | CERTIFICATE N | CATE NUMBER: | | | | | |
| MEMBER IS ELIGIBLE FOR | | | LIEUTENANT | COLONEL AND M | | | | |