

U.S. NAVAL SEA CADET CORPS U.S. NAVY LEAGUE CADET CORPS		NSCC OFFICER/INSTRUCTOR OF THE YEAR		<i>NSCC OFFICER OR INSTRUCTOR USE ONLY</i>	
REFER TO AWARDS MANUAL CHAPTER 2 FOR INSTRUCTIONS. MAIL WITH REQUESTED ATTACHMENTS TO REGIONAL DIRECTOR.					
1. APPLICANT INFORMATION					
1a. Last Name		1b. First Name		1c. MI	1d. Social Security Number
1e. Home Address		1f. City		1g. State	1h. Zip Code + 4
1i. Home Phone		1j. Email Address		1k. Current Rank	1l. Uniform Status <input type="checkbox"/> Uniformed <input type="checkbox"/> Non-Uniformed
1m. Officer Professional Development (Dates)					
OPD 101:		OPD 201:		OPD 301:	OPD 401:
2. UNIT / ENROLLMENT INFORMATION					
2a. Unit Name			2b. Date Enrolled		2c. Time in Program
2d. Unit Drill Location (City & State)					2e. Unit Staff Position
2f. Unit Manning OFF: MIDN: INST: NSCC: NLCC: Total:					2g. Annual Inspection Year: Score:
3. Escort Duty (Use additional sheets if necessary)					
3a. Training Name and Location			3b. Billet		3c. Days
3d. Date (MMM YY)					
4. RECORD AWARDS (Use additional sheet if necessary)					
4a. Award Name		4b. Date Awarded		4c. Award Name	
5. COMMUNITY SERVICE / EXTRA CURRICULAR ACTIVITIES					
5a. Organization Name / Type of Activity				5b. Date(s) of Service/Participation	

NSCC OFFICER OF THE YEAR

6. OFFICER EVALUATION

Personal Factors	NOB	1.0*	2.0	3.0	4.0	Comment (Use additional sheets if necessary)
6a. Knowledge of the NSCC Program						
6b. Performance of Primary NSCC Duties						
6c. Instructor Ability						
6d. Performance as an Escort Officer						
6e. Administrative Ability						
6f. Recruiting/Retention Ability						
6g. Leadership Command Ability						
6h. Military Bearing/Appearance						
6i. Personal Conduct						
6j. Attendance						
6k. TOTAL (Less NOBs)						NOTE: SCORES OF 1.0 MUST BE CLARIFIED IN THE COMMENTS SECTION ABOVE.

7. ENDORSEMENT

7a. NLUS Committee Chairman/Council President or Unit Commanding Officer's Recommendation/Summary of NSCC Recognitions (Use separate sheet if necessary).

7b. Nominating Person's Name / Rank (If Applicable)	7c. Signature	7d. Date (DD MMM YY)
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8. REQUIRED ATTACHMENTS

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| <ul style="list-style-type: none"> • Full Length Photo of Officer (Required) • Copy of Last Officer Evaluation Report (NSCADM 017) | <ul style="list-style-type: none"> • Copy of Record of Awards (NSCADM 010) • Copy of other Letters of Recommendation Deemed Significant |
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