**FORM 10 INDIVIDUAL MERIT/DEMERIT REPORT**

**For use of this form see Section 10 of the Operations Manual**

|  |  |  |  |
| --- | --- | --- | --- |
| **RECORD OF CADET COUNSELING/ CONDUCT REVIEW** |  | **DATE:** |  |
|  |  |  |
|  |  |  |  |  |
| **1. NAME (Last, First MI.)** |  | **2. UID** | **3. Platoon** | **4. Class** |
|  |  |  |  |  |
| **5. REASON FOR COUNSELING** | ο Cadet Merit | ο Cadet Demerit |  |  |
| ο TIER I OFFENSE |  | ο TIER V OFFENSE |  |  |
| ο TIER II OFFENSE |  | ο Outstanding Performance |  |
| ο TIER III OFFENSE |  | ο Other |  |  |

* + TIER IV OFFENSE

 **SUMMARY OF COUNSELING / BACKGROUND INFORMATION**

 **(Leader states the reason for the counseling, e.g., offense, outstanding performance or other.**

*CONTINUED ON B ACK*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **7. CTO PERFORMANCE REVIEW RECOMMEND?** | YES | ο | NO | ο |  |
|  |  |  |  |  |  |  |
| 8. | **CTO PHONECON WITH PARENTS REQUIRED?** |  |  |  |  |  |
|  | YES ο | NO | ο | UNABLE TO CONTACT / LEFT MESSAGE ο |
|  |  |  |  |  |  |
| **9.** | **CADET AGREEMENT WITH COUNSELING** | **YES** | **ο** | **NO** | **ο** |

**10. CADET STATEMENT CONCERNING COUNSELING- REQUIRED. (Cadet *must* comment on the understanding of this counseling.)**

|  |  |  |
| --- | --- | --- |
| 11. | **NAME OF COUNSELOR** | **12. SIGNATURE** |
|  |  |  |
| 13. | **NAME OF CADET** | **14. SIGNATURE** |
|  |  |  |
| 15. | **NAME OF CADET COMMANDER** | **16. SIGNATURE** |