

**LEADING SEAMAN (LS) / CORPORAL (CPL) / CORPORAL (CPL)**

**MERIT-BASED RANK PROMOTION CRITERIA CHECKLIST**

Cadet's Name: \_\_\_\_\_

Date: \_\_\_\_\_

<b>Section 1: Prerequisites for Promotion</b>		
	<b>Achieved</b>	<b>Not Achieved</b>
• Holds the rank of AB / LCpl / LAC.	<input type="checkbox"/>	<input type="checkbox"/>
• Successfully completed Phase One / Green Star / Proficiency Level One.	<input type="checkbox"/>	<input type="checkbox"/>
• Participated in the Cadet Fitness Assessment as part of PO X04 (Personal Fitness & Healthy Living).	<input type="checkbox"/>	<input type="checkbox"/>

<b>Section 2: Div O / PI Comd / Flt Comd Recommendation</b>			
Recommendation is based on the following criteria, on a review of cadet training results and a file review:			
	<b>Needs Developing</b>	<b>Acceptable</b>	<b>Outstanding</b>
<ul style="list-style-type: none"> <li>• dress and deportment</li> <li>• conduct, discipline and attitude</li> <li>• attendance</li> <li>• participation</li> <li>• response to direction</li> <li>• ability to interact positively and comfortably with others</li> <li>• ability to make sound judgements regarding their own actions</li> <li>• willingness to accept responsibility</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Based on the criteria above, I recommend the cadet:			
<ul style="list-style-type: none"> <li>• not be promoted at this time but reconsidered in ____ months.</li> <li>• be promoted as soon as possible.</li> </ul>			<input type="checkbox"/> <input type="checkbox"/>
Div O / PI Comd / Flt Comd Signature: _____		Date: _____	

<b>Section 3: CO's Approval</b>	
The Div O / PI Comd / Flt Comd recommendation for promotion is:	
<ul style="list-style-type: none"> <li>• not approved</li> <li>• approved</li> </ul>	<input type="checkbox"/> <input type="checkbox"/>
CO's Signature: _____	Date: _____

Notes: