

# USS EXCALIBUR PROMOTION NOMINATION FORM



A Correspondence Chapter of STARFLEET International



A Region of STARFLEET International



The Star Trek Fan Association, Inc.

## Nominee Information

Name:				Birth Date:	
Address 1:					
Address 2:					
City:		State:		Zip:	
Phone #:		Email:			

## Nominee Chapter Information

SCC #:		Time in STARFLEET:	
Current Rank:		Time in Current Rank:	
Current Department:			
Current Position:			

## Nominator Information

Name:				Birth Date:	
Address 1:					
Address 2:					
City:		State:		Zip:	
Phone #:		Email:			

## Nominator Chapter Information

SCC #:		Time in STARFLEET:	
Current Rank:		Time in Current Rank:	
Current Department:			
Current Position:			

## Promotion Request

Recommended Promotion to the following Rank:			
Does the Nominee Have At Least the Minimum Promotion Points Needed for Promotion?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Has the Nominee Completed the STARFLEET Academy Officer's Training School?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Has the Nominee Completed the STARFLEET Academy Officer's Command College?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

## Nominee Qualifications

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Does the Department Chief Approve of the Promotion Request?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Does the Approving Authority Approve? (Promotion Board)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Commanding Officer's Signature:		Date:	