CADET PROGRESSION EVALUATION											
LAST NAME, FIRST NAME, MIDDLE INITIAL		CAP GRADE	CURREI	NT LEADERSHIP POSITION HELD							
REASON FOR EVALUATION			EVALUA			TION INCLUSIVE DATES					
PROMOTION REVIEW ACHIEVEMENT #	PERIODIC REVIEW SEE INCLUSIVE DATES		ACTIVITY GENERATED FROM				т	С			
INSTRUCTIONS: Completion of a Cadet Progress Evaluation (CPE) is MANDATORY for each cadet before the completion of each Phase (more often if the squadron commander desires). Evaluators will be senior members or cadet of a higher grade than the cadet being evaluated. The evaluators will be designated by the squadron commander in advance. CPE is OPTIONAL at the completion of National/Region/Wing/local activities (forward a copy to cadet's squadron commander within 45 days of activity end). Place an "X" to indicate evaluation of performance in each category using the key below. Base evaluations on the requirements of the cadet's current Phase or activity. Rate cadets against other cadets of the same Phase, age or position. Make remarks as appropriate. It is MANDATORY to review this evaluation with the cadet. An unsatisfactory in any category requires a reevaluation within 30 days and correction to at least SATISFACTORY. Disagreements with ratings may be appealed to the squadron (or activity) commander whose decision is final. After the squadron (or activity) commander signs the form, the form is placed in the cadet's personnel file. The deputy commander for cadets may sign for the squadron commander.											
 O = OUTSTANDING: Performance is carried out in a far superior manner; the cadet is of exceptional merit. E = EXCELLENT: Exceeds standards; performance carried out in a superior manner. S = SATISFACTORY: Meets the training standards, satisfactory performance relatively free of deficiencies. M = MARGINAL: Performance does not meet some standards; deficiencies exist that need improvement. U = UNSATISFACTORY: Definitely has failed to meet the requirements; needs immediate improvement. 											
MILITARY CHARACTERISTICS											
APPEARANCE (Uniform neat, c Remarks:	clean, and properly worn; clea	an sl	haven; hair IAW CAPM (39-1; shoes	s shined)	0	Е	S	Μ	U	
MILITARY BEARING (Respect and ceremonies)	ses good manners; partie	cipates pro	perly in drill	0	E	S	Μ	U			
Remarks:											
LEADERSHIP											
ATTITUDE TOWARD TRAINING (Understands his/her leadership role; takes duties seriously; attentive; does his/her best to improve; respects authority; follows leadership of others) Remarks:					0	E	S	М	U		
INTERPERSONAL SKILLS (Has respect and support of peers, subordinates & supervisors; leads instead of drives; cooperates; makes his/her ideas clear to others; works will with others) Remarks:					0	E	S	М	U		
SENSE OF RESPONSIBILITY common sense; accepts personal	and thorough; uses goo	od judgmer	nt and	0	E	S	М	U			
Remarks:											
PERSONAL TRAITS											
INTEGRITY (Adheres to high mo	oral standards; is reliable, hor	nest,	trustworthy, loyal, coura	ageous)		0	E	S	Μ	U	
Remarks: ENTHUSIASM (Has intense interest in task at hand; is cheerful & optimistic; is willing to perform					ob)	0	E	S	М	U	
Remarks: SELF-CONFIDENCE (Has self-assurance based on genuine knowledge and ability; makes sound decisions; decisive) Remarks:						0	E	S	М	U	
Remarks: INITIATIVE (Performs duties with a minimum of instruction; thinks independently; is resourceful; possesses drive) Remarks:						0	E	S	М	U	
Remarks: CAP FORM 50 DEC 98 PREVIOUS	S EDITIONS WILL NOT BE U	JSE	D.								

OVERALL EVALUATION (Be factual and specific. Prepare co of the ratina)	omments below which will increase the object	ivity O E S M U								
ADDITIONAL POSITIVE FEEDBACK										
AREAS THAT MAY REQUIRE IMPROVEMENT										
List the positions the cadet has held during this period:										
List the CAP activities in which the cadet has participated during this rating period:										
☐ This evaluation will be used as part of a promotion review for the achievement number:										
	E INOT READY AT THIS 1	IME								
☐ This evaluation will be used as part of a Civil Air Pat ACTIVITY COMPLETION: ☐ PASSED	rol activity: DID NOT PASS									
ACTIVITY COMPLETION: PASSED DID NOT PASS SIGNATURES										
NAME & GRADE OF EVALUATOR (PRINTED)	SIGNATURE	DATE								
NAME & GRADE OF EVALUATED CADET (PRINTED)	SIGNATURE	DATE								
NAME & GRADE OF APPROVING COMMANDER (PRINTED)	SIGNATURE	DATE								
CAP FORM 50 DEC 98 (Reverse)										