

**JOINT CADET LEADERSHIP COURSE (JCLC)
PRINCIPAL APPROVAL FORM**

Note to Instructors: This form must be turned into JCLC at time of in-processing

School Name: _____

School District: _____

AFJROTC Unit Number: _____

1. PRINCIPAL CERTIFICATION: I certify my school district (named above) approves the participation of the JROTC Unit named above in the Joint Cadet Leadership Course (JCLC) to be held at Hardin-Simmons University in Abilene, Texas, 3–8 June 2024. This course is hosted by AFJROTC TX-936 and follows the district policies of San Angelo Independent School District (SAISD) as the sponsoring school district. This course is one of many options available for students during the summer and it has been carefully considered as a location of choice for the betterment of cadet leadership skills.

a. The instructors we are sending are school district employee(s), have met district requirements for employment to include background checks, meet my understanding of the requirements placed upon instructors by the Department of the Air Force and are covered by any applicable school district insurance and liability coverage during their travel to and from and participation in JCLC. Instructors not on contract with the school district are aware they are performing this duty at their own expense and risk.

b. I also understand all cadets will be required to participate in all physical activities each day to include marching, running, calisthenics and participation in team sports. If at any time a cadet cannot participate in all phases of this course, the cadet will be sent home at expense to the parents of the student involved.

2. FIELD TRIP RULES APPLY. During this course, I understand school district rules for field trips apply to the behavior of the students and instructors. If SAISD school district rules/requirements are more stringent, they will take precedence over our school district rules. The instructors will comply with the parent's or guardian's instructions about the use of medications during travel to and from and while participating in the course.

3. NOTIFICATIONS. Should a problem occur with a student, or an emergency situation exist, I ask, that I be contacted at the number listed below.

Contact Number: _____

Signature of Principal: _____ Date: _____