

United States Power Squadrons®

Educational Department

Squadron Report of Examination

Course	Squadron		Squadron Acct.	Date
Exam No.	Order No.	No. of Candidate	es	
Type or prin	t the information requeste	ed on this form		
	e information requested of		Order Confirmation en	closed in the
	date of the exam (upper ri	ight) and whether or	r not each of the listed	candidates took
	copy of this completed for other materials listed on t		n Order Confirmation to	o USPS HQ along
• Failure to r	eturn all required mate	rials to HQ will de	lay examination proce	essing.
If you need any que	estions clarified, list the	question number b	below and a detailed s	tatement.
Other exceptions:				
Name of Class Cha	irman or Assistant pres	ent		
Name & Title of vis	sitors			
_	lministered this examin Section 6.43 except as n		ee with procedures in	the <i>USPS</i>
Administrator		,	Office	
	Signed		ChLB,SEO,Cdr,	Instructor,Other
			Phone()	
	Name			
		Email Ac	ddress	