

# United States Power Squadrons®

SAIL AND POWER BOATING

## USPS SIGHT CERTIFICATION FORM

### Junior Navigation



Candidate's Name \_\_\_\_\_ Squadron \_\_\_\_\_

Certificate Number \_\_\_\_\_

*EACH STATEMENT THAT APPEARS BELOW IS TO BE SIGNED BY THE COURSE INSTRUCTOR OR DESIGNEE AND RETURNED WITH THE CANDIDATE'S JN EXAM. THE EXAM WILL NOT BE GRADED UNLESS THE CERTIFICATION IS COMPLETED AND RETURNED WITH THE EXAM.*

1. I have been present when the candidate named above had taken observations with a navigator's sextant and, in my opinion, he/she is capable of properly using and caring for the instrument.

Signature  
and Grade \* \_\_\_\_\_ Date \_\_\_\_\_

Squadron Position \*\* \_\_\_\_\_

2. I *certify* that the candidate has successfully completed the requirements for the Junior Navigation Sight Folder and has complied with the rules stated in the Junior Navigation manual, that the work is accurate and neat, and that the data on the work sheets agree with the data in the log.

Signature  
and Grade \* \_\_\_\_\_ Date \_\_\_\_\_

Squadron Position \*\* \_\_\_\_\_

\* The Grade of the individual attesting to paragraphs 1 & 2, above, must be a JN, N or SN.

\*\* Squadron Position refers to educational duties, e.g., Ch/LB/AG, Instructor, Sight Checker, etc.