

SQUADRON CHANGE OF WATCH

INSTRUCTIONS:

Squadron Commanders: Please type or print the **Incoming Bridge** clearly and return this form to the District Officer that sent it to you.

District Officers: Verify the information on this form at the Change of Watch. Make corrections as necessary. Sign the form and forward copies of this form to other Bridge Officers and the Asst. Secretary.

SQUADRON: _____

COW Date: _____

CDR	Name _____ Mailing _____ Address _____ Phone H _____ W _____ Fax _____ Email _____	Grade _____ Cert # _____ OpTrg Y ___ N ___ LDP Y ___ N ___	Spouse Name _____ Key OpTrg=Operations Training LDP=Leadership Development Training
XO	Name _____ Mailing _____ Address _____ Phone H _____ W _____ Fax _____ Email _____	Grade _____ Cert # _____ OpTrg Y ___ N ___ LDP Y ___ N ___	Spouse Name _____ Key OpTrg=Operations Training LDP=Leadership Development Training
SEO	Name _____ Mailing _____ Address _____ Phone H _____ W _____ Fax _____ Email _____	Grade _____ Cert # _____ OpTrg Y ___ N ___ LDP Y ___ N ___	Spouse Name _____ Key OpTrg=Operations Training LDP=Leadership Development Training
ADMIN	Name _____ Mailing _____ Address _____ Phone H _____ W _____ Fax _____ Email _____	Grade _____ Cert # _____ OpTrg Y ___ N ___ LDP Y ___ N ___	Spouse Name _____ Key OpTrg=Operations Training LDP=Leadership Development Training
SEC	Name _____ Mailing _____ Address _____ Phone H _____ W _____ Fax _____ Email _____	Grade _____ Cert # _____ OpTrg Y ___ N ___ LDP Y ___ N ___	Spouse Name _____ Key OpTrg=Operations Training LDP=Leadership Development Training
TREAS	Name _____ Mailing _____ Address _____ Phone H _____ W _____ Fax _____ Email _____	Grade _____ Cert # _____ OpTrg Y ___ N ___ LDP Y ___ N ___	Spouse Name _____ Key OpTrg=Operations Training LDP=Leadership Development Training