## CENTRAL TEXAS COLLEGE

## **Marine's Supervisor or Commander Certification**

Date:			
To:	Supervisor or Commanding Officer,  Central Texas College, C & I Evaluations Department  MOS Proficiency in a Marine Corps Aviation MOS		
From:			
Subject:			
Rank	Name ,	SSN	
<b>MOS</b> , (Check $$ One) Skill Level I $\square$ Skill Level II $\square$ Skill Level III $\square$ Skill Level IV $\square$ , has requested an evaluation of his/her military training and experience for conversion into college credits. Should you believe the named service member is proficient in the above MOS(s), request the statement below be completed by you. This information will enable the student to maximize the amount of military credit that			
	d by you. This information will enable the stud ded him/her.	lent to maximize the amount of military credit that	
Thank you fo	Thank you for your assistance in this matter.		
Central Texa Evaluations socevaluatio (254)526-13	Department n.admin@ctcd.edu		
Date:			
Γo: Cent	tral Texas College, Evaluations Department		
From: Supe	pervisor or Commanding Officer,		
Email Addre	ess:		
I consider th	ess:e above-named service member to be qualified	I in the MOS(s) listed.	
Signature, S	Supervisor or Commanding Officer	Rank	
	rn this document to Central Texas College, A 76540-1800	ATTN: C & I Evaluations Dept, P.O. Box 1800,	

Revised (June 20, 2013)