

<b>U.S. NAVAL SEA CADET CORPS</b> <b>U.S. NAVY LEAGUE CADET CORPS</b>	<h1 style="margin: 0;">RECORD OF SWIM QUALIFICATION</h1>					
<b>INSTRUCTIONS</b>						
1. The criteria listed meets U.S. Navy basic swim qualification standards. 2. Use this form to evaluate all NSCC/NLCC personnel. 3. Make an appropriate entry in the Administrative Remarks (NSCADM 008) stating assessment level and retain original in unit files or service jacket. 4. Submit a copy to the COTC when proof of Swim Qualification is required to attend Advanced Training.						
<b>1. MEMBER INFORMATION</b>						
1a. Last Name	1b. First Name	1c. MI				
1d. Rate	1e. Unit Name					
1f. Drill Location		1g. Location of Assessment				
<b>2. SWIM SKILL ASSESSMENT</b>						
SHALLOW WATER SWIM 15 YARDS IN CHEST DEEP WATER	DEEP WATER SWIM 15 YARDS IN WATER OVER HEAD	TREAD WATER FOR ONE MINUTE				
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No				
<b><i>If all skills are mastered continue to Section 3. If not, skip to Section 6.</i></b>						
<b>3. THIRD CLASS SWIMMER ASSESMENT</b>						
DEEP WATER JUMP FROM A MINIMUM HEIGHT OF FIVE FEET	50 YARD SWIM DEMONSTRATE THE FOLLOWING				PRONE FLOAT FIVE MINUTES	WATER SURVIVAL SHIRT AND TROUSER INFLATION
	FRONT CRAWL	BREAST STROKE	BACK STROKE	ELEMENTARY BACK STROKE		
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b><i>If all skills are mastered continue to Section 4. If not, skip to Section 6.</i></b>						
<b>4. SECOND CLASS SWIMMER ASSESMENT</b>						
100 YARD SWIM DEMONSTRATE THE FOLLOWING						
FRONT CRAWL 25 YARDS	BREAST STROKE 25 YARDS	BACK STROKE 25 YARDS	ELEMENTARY BACK STROKE 25 YARDS	PRONE FLOAT FIVE MINUTES		BACK FLOAT FIVE MINUTES
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b><i>If all skills are mastered continue to Section 5. If not, skip to Section 6.</i></b>						
<b>5. FIRST CLASS SWIMMER ASSESMENT</b>						
100 YARD SWIM DEMONSTRATE THE FOLLOWING USING STRICTER CRITERIA THAN SECTION 4						
FRONT CRAWL 25 YARDS	BREAST STROKE 25 YARDS	BACK STROKE 25 YARDS	ELEMENTARY BACK STROKE 25 YARDS	PRONE FLOAT FIVE MINUTES		BACK FLOAT FIVE MINUTES
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b><i>If all skills are mastered continue to Section 6. If not, skip to Section 6.</i></b>						
<b>6. CERTIFICATION</b>						
<b><i>“The above listed individual has been assessed and is certified at the following swim qualification level”</i></b>						
<input type="checkbox"/> Basic Swimmer		<input type="checkbox"/> Third Class Swimmer		<input type="checkbox"/> Second Class Swimmer		<input type="checkbox"/> First Class Swimmer
6a. Full Name and Rank of Certifying Individual (Print of Type)			6b. Signature of Certifying Individual			6c. Date (DD MMM YY)