



# ShOC VRR

**CHAPTER INFORMATION**

Class	
Chapter Name/Region	NCC Number
Mailing Address	Phone Number
City	State/Prov Zip

**CHECKLIST OF REQUIREMENTS**

Commanding Officer  
 Officer Training School (OTS)  
 Officer Command College (OCC)

Executive Officer  
 Officer Training School (OTS)  
 Officer Command College (OCC)  
 Minimum Membership Requirements  
 DTS Approval Letter

**SUPPORT CHAPTER INFORMATION**

Chapter Name/Region	CO Name
	Email

**COMMANDING OFFICER**

Name		
Mailing Address		
City	State/Prov	Zip
DOB	SCC	Rank
Email		

**EXECUTIVE OFFICER**

Name		
Mailing Address		
City	State/Prov	Zip
DOB	SCC	Rank
Email		

**CHAPTER MEMBERSHIP LISTING (EXCLUDE CO/XO)**

	Member Name	SCC	Mailing Address	City	State	Zip
03						
04						
05						
06						
07						
08						
09						
10						

**REGISTRATION VERIFICATION—FOR OFFICIAL USE ONLY**

Ops/ShOC Notes	Authorized Signatures		Date
	01	Support Chapter CO	
	02	Regional Coordinator	
	03	Chief of ShOC	
	04	Chief of Operations	



# ShOC VRRR

CHAPTER MEMBERSHIP LISTING CONTINUATION PAGE

	Member Name	SCC	Mailing Address	City	State	Zip
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