**“MEMORANDUM OF AGREEMENT – COMPLETION OF PROFESSIONAL MILITARY EDUCATION (PME) MILITARY HISTORY REQUIREMENT”**

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Last, First, MI)**

**1. Complete this paragraph if you plan to take (or have taken) a pre-approved Military History class as listed on “Tab A” attached to the letter on Professional Military Education. Otherwise, skip this paragraph and go to paragraph 2.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(CLASS NUMBER & NAME)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(SEMESTER/TERM & YEAR OF COMPLETION “OR”**

**PLANNED SEMESTER/TERM & YEAR OF COMPLETION)**

**2. Complete this paragraph if you want to use a substitute class to meet the Military History requirement for a class not pre-approved as listed on “Tab A” attached to the letter on Professional Military Education.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(SUBSTITUTE CLASS NUMBER & NAME)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(SEMESTER/TERM & YEAR OF COMPLETION “OR”**

**PLANNED SEMESTER/TERM & YEAR OF COMPLETION)**

**This substitute class covers (or covered) the following on American Military History:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**“I understand that completion of Professional Military Education is required to commission. I understand that “if” I am scheduled to take a Military History class as listed above it is my responsibility to take that class (or request approval for different class and complete another Memorandum of Agreement).”**

**SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**1**

**“PROFESSIONAL MILITARY EDUCATION (PME) MILITARY HISTORY CLASS SUBSTITUTE CLASS APPROVAL (IF APPLICABLE) & CERTIFICATION OF COMPLETION OF THE PME MILITARY HISTORY REQUIREMENT”**

**TO BE COMPLETED BY THE PROFESSOR OF MILITARY SCIENCE (PMS), OR PARTNERSHIP SCHOOL ASSISTANT PMS IN CHARGE.**

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Last, First, MI)**

**(Complete the following “if applicable” for a substitute class):**

**“I have approved the Cadet to take the substitute class as listed in paragraph 2 of the Cadet’s Memorandum of Agreement for meeting the pre-commissioning PME Military History requirement.”**

**TED M. LEBLOW**

**LTC, AV**

**Professor of Military Science**

**(Complete the following when the PME Military History class**

**requirement is completed):**

**“I certify that the Cadet completed the following approved Military History course and meets the pre-commissioning PME requirement.”**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(COURSE NUMBER & NAME)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(SEMESTER/TERM & YEAR OF COMPLETION)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(GRADE RECEIVED)**

**TED M. LEBLOW**

**LTC, AV**

**Professor of Military Science**

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