United States Army Infantry School Waiver Form

Unit Letter Head: (Unit Name):	
(Street Address):	
(City, State, Zip):	
Type of Waiver:	
Course:	
Course Number and Date:	
OTE: A Letter of Lateness signed by an O6 is required if submitted within 75 days of start date. NO EXCEF	PTIONS!
Date of waiver submission (Month/Day/Year):	
9 pertains to the Soldier that is in need of the Waiver:	
. Rank: 6b. AOC/MOS:	
Name (Last, First, MI):	
Justification for Waiver (Why does the Soldier need a waiver):	
Point of Contact for waiver request (Name, Phone number and Email):	
o. Signature block of 1 st O5 (LTC) or higher in Soldier's Chain of ommand:(Can be digitally or hand signed)	
Signature:	
Last Name, First Name, MI:	
Rank, Branch:	
Title/Position:	