

QUESTIONNAIRE

Group Name _____ Charter No. _____

YEAGER AWARDS (2002 only)

Personnel assigned to Group only. Please list names. This will serve as a check on our records as well as provide information for the annual report.

215 SPECIALTY TRACK (2002 only)

Personnel assigned to Group only. Please list names.

NCASE, WING CONFERENCE, REGION CONFERENCE, ETC. (2002 only)

Personnel assigned to Group only. Please list names and activity attended.

SCHOOLS (2002 only)

Did Group present an aerospace education program in schools or assist a squadron or squadrons that did? Please list schools and other, participating, CAP units, eg. Squadron, other groups.

OUTSIDE ORGANIZATIONS (2002 only)

Was Group involved in aerospace education with outside organizations? This could be just about anything as long as Aerospace Education is involved. Describe. Don't forget to mention other CAP units participating.

AEROSPACE EXCELLENCE AWARD PROGRAM (2002 only)

While this program is intended mainly for Cadets, Groups and Senior Squadrons can have some fun with it, too. If Group did complete it this year, please say so.

YES _____ NO _____

LOCATOR INFORMATION

Group Meeting Place:

Group Meeting Day/Time:

GROUP AEROSPACE EDUCATION OFFICER

Rank _____ First Name _____ Last Name _____ CAP ID No. _____

Address: _____

Telephone no. _____ e-mail: _____

Does Group AEO have Yeager Award? Yes _____ No _____ 215 Specialty Track? T ___ S ___ M ___