Candidate Leadership Assessment (ARNG OCS *SOAR* Card)

STAFF PROPONENT IS ARNG OCS SME CELL

EVENT (Developmental, Assessment, SPOTREP):		TYPE OF EVALUATION:
CANDIDATE NAME:	**SQD/PLT/CO/STATE:**	**LEADERSHIP POSITION:**

SITUATION: (Describe the assessment situation and conditions. Include time, location, event, or other context. para 2-39.)

DTG/TRNG DAY#: _____ **DIST/DIR**: _____

EVAL & LANE#: _____ **MISSION**: _____

WEATHER: _____ **ENEMY SIZE**: _____

OTHER CONTEXT: _____

OBSERVATION: (Describe the leadership behaviors that the leader exhibits using action words. Para 2-39 & 2-41.)

PLATOON TRAINER INBRIEF (CRITICAL EVENTS & EXPECTATIONS)

PLATOON TRAINER OBSERVATIONS:

***ASSOCIATE & ASSESS*:** (Identify and associate the competency/attribute that best describes the leader's actions. Para 2-39)

SUSTAIN (add comments on reverse)	IMPROVES (add comments on reverse)
1-	1-
2-	2-
3-	3-

Discussion for SUSTAINED attributes and competencies from the front side:
(Compare observation against the leader performance indicators and link effects and outcomes to unit performance and/or mission. Para 2-42)

1-

2-

3-

Discussion for IMPROVED attributes and competencies from the front side:
(Compare observation against the leader performance indicators and link effects and outcomes to unit performance and/or mission. Para 2-42)

1-

2-

3-

REINFORCE & RECOMMEND: *(Record how to reinforce the leader's behavior through praise or correction. Para 2-39)*

Additional Comments:

Overall Assessment (Choose one): **EXCELLENT** ☐ **PROFICIENT** ☐ **CAPABLE** ☐ **UNSAT** ☐

DATE:	**EVALUATOR NAME/SIGNATURE:**
OC SIGNATURE:	**SENIOR TAC/CO/1SG SIGN/DATE:**