



GO/NO GO: CLOSE ORDER DISMOUNTED DRILL

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|--|--------------|
| Candidate: | Unit: |
| Trainer: | |
| <i>Printed Name, Rank, Title, and Unit</i> | |
| Signature _____ Date: _____ | |

Select One: Individual Drill Conduct: squad drill platoon drill company drill

| Soldier must score Go on all movements | | | | | |
|---|------------------------------|---------------------------------|-------------------------|------------------------------|---------------------------------|
| Fall In | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | Forward, March | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> |
| Dress Right Dress | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | Left Flank, March | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> |
| Ready Front | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | Right Flank, March | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> |
| Present Arms | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | Rear march | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> |
| Order Arms | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | Rear March | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> |
| About Face | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | Column Right - March | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> |
| About Face | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | Column Left – March | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> |
| Parade, Rest | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | Mark Time, March | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> |
| Stand At Ease | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | Forward March | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> |
| At Ease | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | Sqd/Plt/Co, Halt | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> |
| Sq/Pl/Co: Attention | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | Left face | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> |
| Left Step March | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | Fall Out | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> |
| Squad/Plt/Co – Halt | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | | | |
| Right Step March | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | | | |
| Sq/Plt/Co – Halt | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | | | |
| Right Face | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | | | |
| Cover | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | | | |
| Recover | Go: <input type="checkbox"/> | No Go: <input type="checkbox"/> | | | |