

SMI ROOM INSPECTION WORKSHEET

Company: _____ Battalion: _____

Inspecting Official: _____ / _____ / _____ Date: _____

Rank
CWID
Name

Cadet Name: CWID: (#) = Number of No Go's to Fail a Category 3 or more Categories Failed = Gross Room or 8 Total No Go's cumulative Each subcategory No Go results in 1 Demerit To achieve Outstanding Room, you must have a Go in each Subcategory						General (1)	Go	No Go
						WB Order		
						Cleanliness		
						Unauthorized Item		
						PASS: Yes / No		
Sink (2)	Go	No Go	Med. Cabinet (2)	Go	No Go	Half Press (2)	Go	No Go
Height			Clean			1st Drawer		
Paper			Height Order			2nd Drawer		
Towel			Paper			3rd Drawer		
Dehumidifier			Name Tape			4th/5th Drawer		
Name Tape						Surface		
Clean/Dry						Name Tape		
PASS: Yes / No			PASS: Yes / No			PASS: Yes / No		
Desk (2)	Go	No Go	Bed (2)	Go	No Go	Full Press (2)	Go	No Go
Books			Corners			Top		
Surface			Collar			Shelf		
Paper			Pillow			Hanger Rack		
Drawers			Name Tape			Shoes		
Name Tape			Laundry Bag			Name Tape		
Personal Items			Under Bed			Overnight Bag		
PASS: Yes / No			PASS: Yes / No			PASS: Yes / No		

Additional Comments: