



Quarterdeck User Guide

Version 1.1

Updated: December 15th, 2023

Table of Contents

Getting Started

Accessing Quarterdeck.....	1
Creating your Quarterdeck Log-in.....	2

Tour of Quarterdeck

Access Chart	3
Cadet Quarterdeck View.....	4
Parent Quarterdeck View.....	5
Volunteer Quarterdeck View.....	6
Volunteer Quarterdeck View (Magellan User).....	7
News and Info.....	8
Profile Page (Parent and Volunteer View)	9
Medical Information (Volunteer View)	10
Record Book (Volunteer and Cadet View)	11
Ribbon Rack (Volunteer and Cadet View)	12
Adding another cadet to your profile.....	13

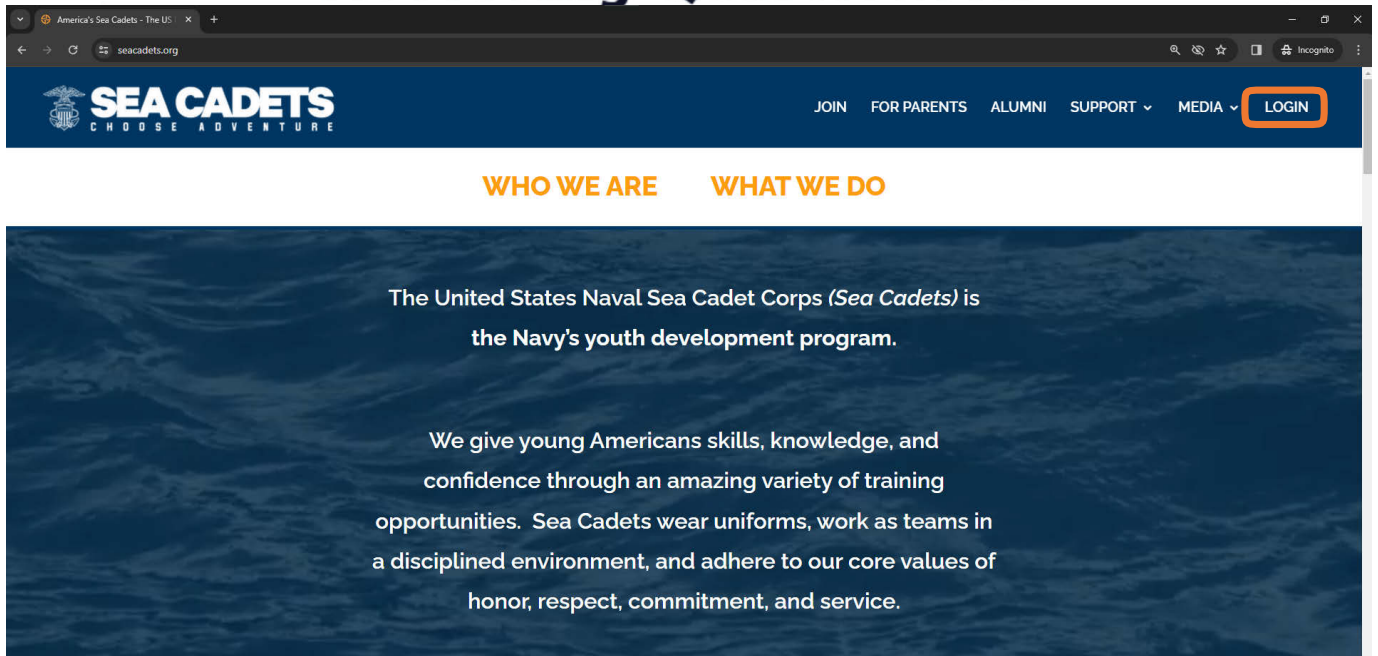
Parent's View of a Cadet's Quarterdeck

Parent's View of a Cadet's page.....	14
Profile Page.....	15
Medical Information.....	16
Medical History.....	17
Over-the-Counter Medication.....	18
Prescription Medication.....	19
Allergies.....	20
Agreements.....	21

Signing up for Training

How to sign up for training.....	22
Training Statuses.....	23

Accessing Quarterdeck



Video Link - <https://youtu.be/AjszrbWK7BI>

How to sign into quarterdeck

1. Go to Seacadets.org
2. Select LOGIN top right corner
3. Arrive at Quarterdeck.seacadets.org

Creating your Quarterdeck Log-in

https://test.dss.mil/Quarterdeck/TEST/secure/login.aspx

U.S. NAVAL
SEA CADET CORPS
CHART YOUR COURSE

Username:
Password:

LOGIN

Forgot Your Password?
Forgot Your Username?
First Time User? Click here to Register.

QUARTERDECK
United States Naval Sea Cadet Corps

Video Link – <https://youtu.be/SPwnArDXWq0>

Creating your Quarterdeck Log-In - For first-time users who haven't created a Quarterdeck Account

1. Select the "First Time User? Click Here to Register"
2. Once your role is selected, input the request information.
3. What you put in must reflect what is in Magellan.
 - a. Currently, only the primary contact of a cadet is able to create a parent profile
 - b. Your USNSCC ID Number is located on your ID card (please contact your unit if you do not have access to your cadet's ID number).
4. Once all of your information has been entered, you can click submit.
5. You will then be emailed a temporary password. You will have 24 hours to log-in
6. On your first log-in you will be prompted to replace your temporary password with our own.

Access Chart

ROLE	MAGELLAN	HOMEPORT	POLARIS	NEWS & INFO	MY OPTIONS	My Cadets	My Upcoming Trainings
PARENT		X		X	• Profile • Family Contacts • Find my cadet • Find trainings	x	x
CADET		X	X	X	• Record Book • Ribbon Rack		x
VOLUNTEER		X	X	X	• Profile • Medical Info • Record Book • Ribbon Rack • Family Contacts • Find my cadet • Find trainings • Darkness to Light	x*	x
AUTHORIZED USER	X	X	X	X	• Profile • Medical Info • Record Book • Ribbon Rack • Family Contacts • Find my cadet • Find trainings • Darkness to Light	x*	x

This chart breakdowns what will be accessible depending on your role in the program.

- **Magellan** - Our internal database housing all of our unit, training, and personnel information.
- **Homeport** - Repository holding all of our policies and resources for units such as recruiting or training.
- **Polaris** - Learning Management System where cadets and volunteers take their online coursework.
- **News & Info** - Holds ways HQ will communicate with your for your viewing later
- **My Option** - Actionable items for the user
- **My Cadets** - Exists if you, as an adult in the program, have a cadet attached to you, allowing you to see that cadet's profile as a parent.
 - If you have no cadets attached your profile, this section will not appear
- **My Upcoming Trainings** - This shows all trainings you and/or your cadets have applied for and your status in the application process.

Cadet View

MY USNSCC PROFILE

Cadet Information



Ryan North, SN/AN
Member Type: NSCC
Joined Date: 04/22/2018
Expiration Date: 07/30/2022

Cadet Advancement Status

Next Rank: PO3
Time in Grade (TIG): ✗
Time in Service (TIS): ✓
Courses: ✓
Exams: ✗
Training: ✗
Physical Readiness Test (PRT): ✓

Unit Information

Unit: (000TEST) USNSCC TEST UNIT
Commanding Officer: LT Frederick Delacruz
Unit Phone: 888-888 8888
Unit Email: testunit@seacadets.org
Unit Website: www.seacadets.org
Meeting Address: U.S. NAVAL SEA CADET CORPS NATIONAL HQ
2300 WILSON BOULEVARD SUITE 200
ARLINGTON, VA 22201-5435
Drill Message: 2nd weekend of every month Saturday and
Sunday from 7:30 am to 4:00pm

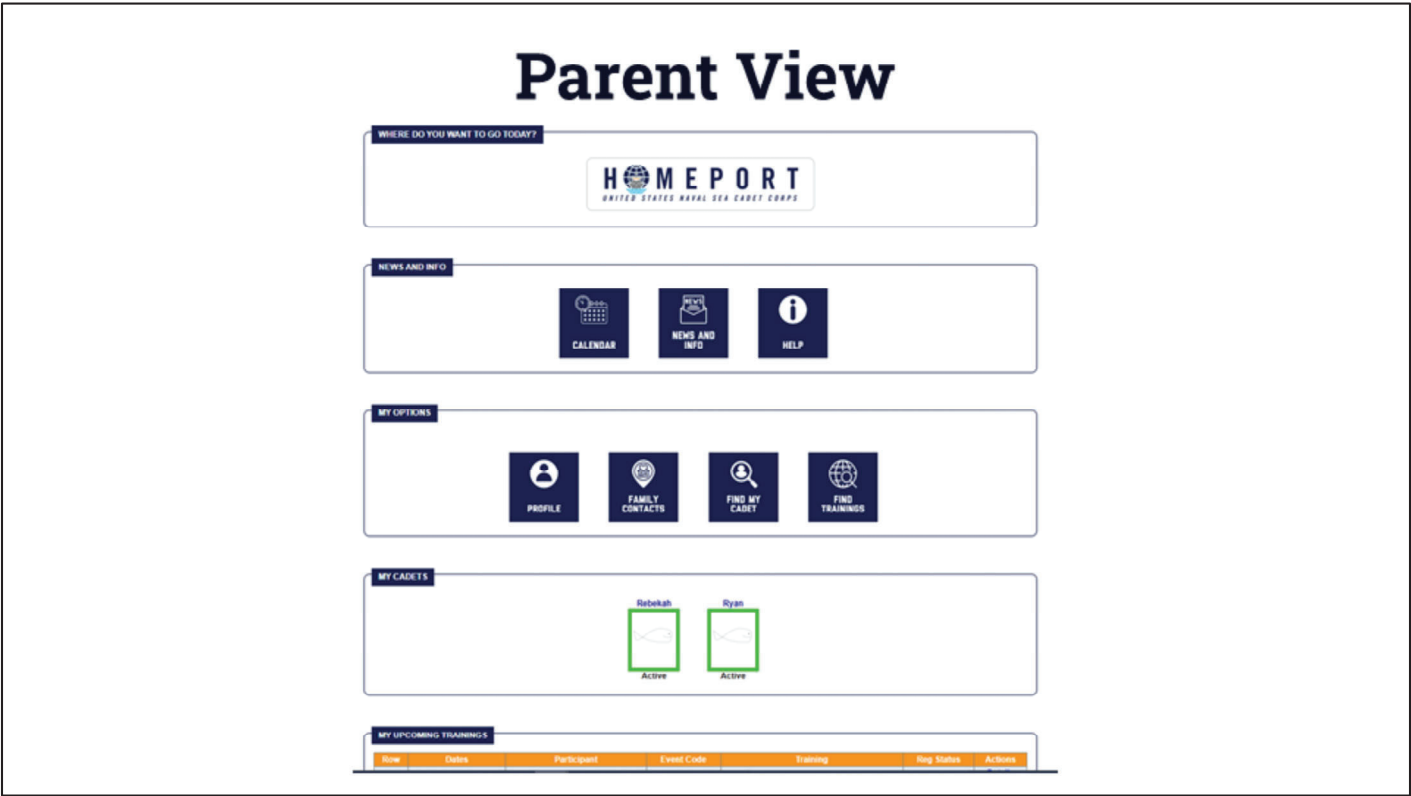
MY ACTIONS



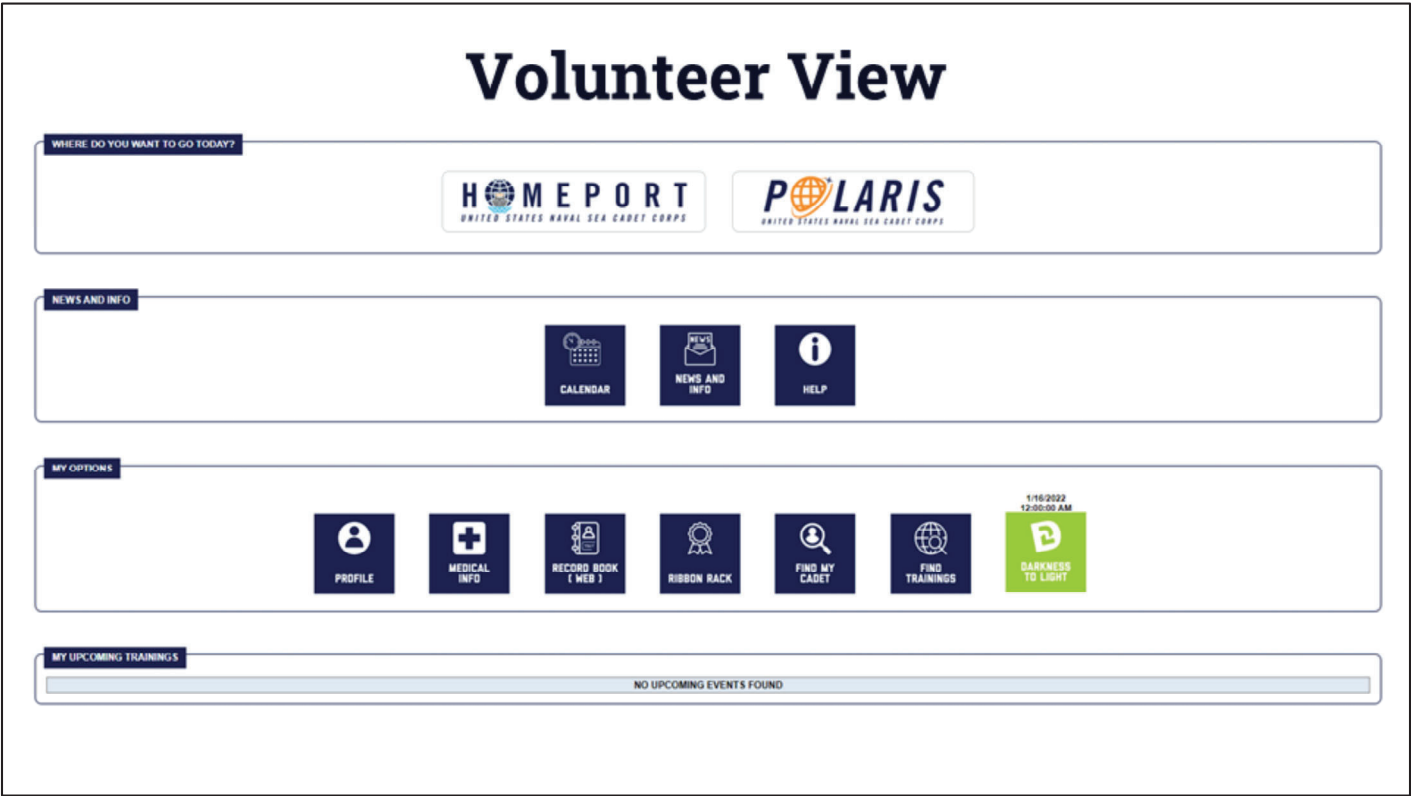
MY UPCOMING TRAININGS

Row	Dates	Event Code	Training	Reg Status	Actions
1	04/01/22-04/30/22	RT-NA-2201	Navy Shore, NSCC Recruit Training	Confirmed	Details

This is the page a cadet will see when they log-in.
Further details are covered in a later section.



This is the page a parent (non-volunteer) will see when they log-in. Further details are covered in a later section.



This is the page a volunteer will see when they log-in.
Further details are covered in a later section.

Authorized Magellan User View

WHERE DO YOU WANT TO GO TODAY?



MAGELLAN
UNITED STATES NAVAL SEA CADET CORPS



HOMEPORT
UNITED STATES NAVAL SEA CADET CORPS



POLARIS
UNITED STATES NAVAL SEA CADET CORPS

NEWS AND INFO



CALENDAR



NEWS AND
INFO



HELP

MY OPTIONS



PROFILE



MEDICAL
INFO



RECORD BOOK
(WEB)



RIBBON RACK



FIND MY
CADET



FIND
TRAININGS



DARKNESS
TO LIGHT

8/20/2021

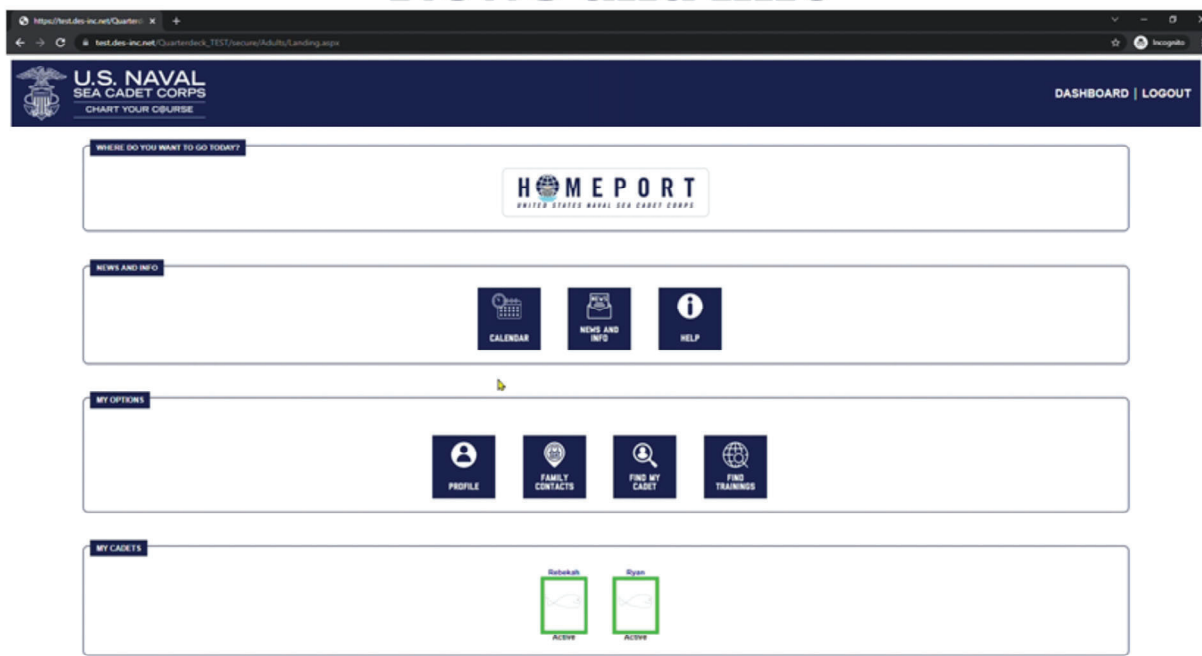
12:00:00 AM

MY UPCOMING TRAININGS

Row	Dates	Participant	Event Code	Training	Reg Status	Actions
1	03/25/22-03/27/22	[REDACTED]	N7-MO-2201	Leadership, COTC Training Session	Approved	Details

This is the page a volunteer who is an authorized Magellan user will see when they log-in. Further details are covered in a later section.

News and Info



Video Link - https://youtu.be/_ooPoxG-VKA

The News and Info Section:

- **Calendar** - National level events such as webinars, national deadlines, and any other national-level events and details.
- **News and Info** - Announcements from HQ
- **Help** - Click here to submit any technical issues you are having with Quarterdeck, Magellan, or Polaris
 - Be sure to work with your chain of command first and give them time to respond before submitting a ticket.

Profile

MY OPTIONS

3/7/2022
12:00:00 AM


PROFILE


**MEDICAL
INFO**


**RECORD BOOK
(WEB)**


RIBBON RACK


**FIND MY
CADET**


**FIND
TRAININGS**


**DARKNESS
TO LIGHT**

MY PROFILE



✓ Denotes required fields

First Name:

Middle Initial:

Last Name:

Email Address:

Pri Phone:

Alt Phone:

Text Capable Phone: (10 digits only)

SAVE

CANCEL

Profile Page - Volunteer and Parent View

- Here, you can adjust your contact information as it is housed in Magellan.
- This will change where Magellan emails are sent.

Medical Info

MY OPTIONS


 PROFILE


 MEDICAL INFO


 RECORD BOOK
(WEB)


 RIBBON RACK


 FIND MY
CADET


 FIND
TRAININGS


 DARKNESS
TO LIGHT

MEDICAL INSURANCE INFORMATION

✓ = required field

NOTE: If you do not have medical insurance, please enter NONE in the Medical Insurance Provider Name, Policy Number, Phone, and Address fields.

Medical Insurance Provider Name ✓

Medical Insurance Policy Number ✓

Medical Insurance Provider Phone ✓

Medical Insurance Provider Address ✓

Insurance Card Front None on File

Insurance Card Back None on File

No file chosen

No file chosen

Medical Information - Volunteer View

- Normally asked on forms, now housed here.
- If you do not have insurance, you may just enter none into the section.

Record Book

MY OPTIONS


PROFILE


MEDICAL INFO


RECORD BOOK (WEB)


RIBBON RACK


FIND MY CADET


FIND TRAININGS


DARKNESS TO LIGHT

3/7/2022
12:00:00 AM

Adult Record Book

 Name: Joseph H Waggen
 Current Rank: NHO STAFF
 Birthdate: 11/30/1992
 Gender: M
 Joined Date: 11/15/2021
 Unit: U.S. NAVAL SEA CADET CORPS NATIONAL HEADQUARTERS

[BACK TO DASHBOARD](#)

TIS History	
DATE	DESCRIPTION
11/15/2021	JOINED PROGRAM

Rank History		
Promoted	Rank	Authority
11/15/2021	INST	

Award History					
Award	Device	EarnedDate	IssuedDate	Notes	Authority

Community Service History					
Date	Organization	Service	Hours	Notes	Authority

Record Book - Volunteers' page and Cadet's

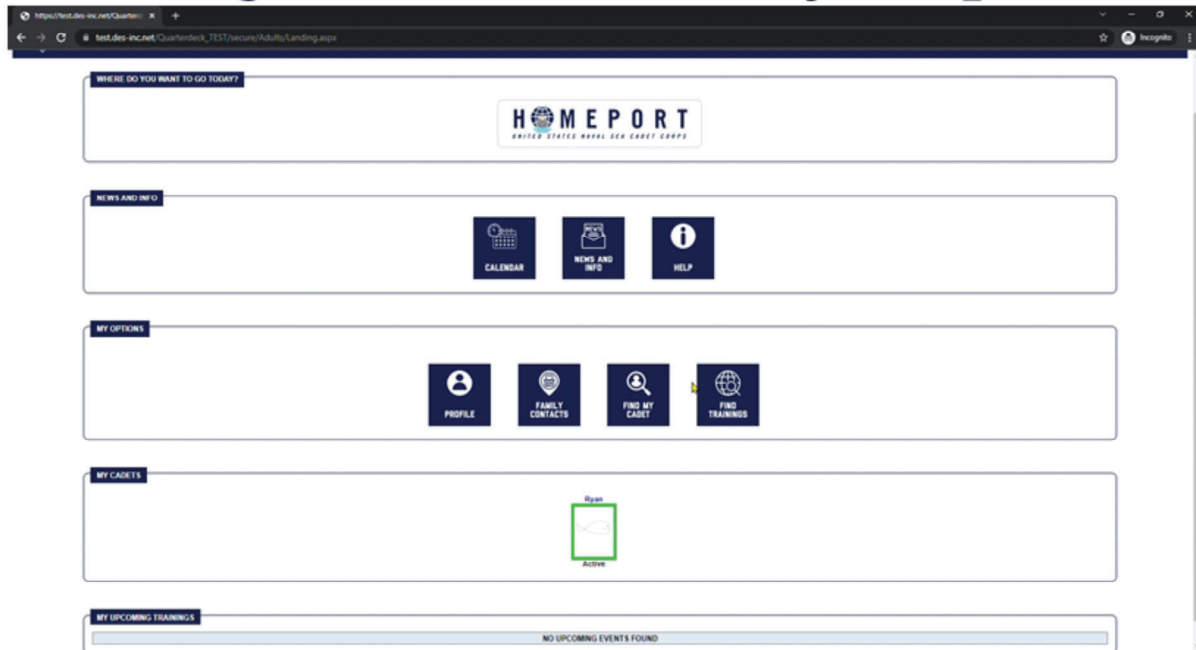
- Pulls information from Magellan.
- If a training, course, or other information does not populate here, it is not in Magellan. You will need to follow up with the chain of command to resolve any issues.



Ribbon Rack Book - Volunteers' page and Cadet's

- Pulls information from Magellan.
- If a ribbon or appurtenance is not shown here, it is not in Magellan. You will need to follow up with the chain of command to resolve any issues.

Adding another cadet to your profile



Video Link - <https://youtu.be/FK6C6tz2AdU>

Adding a Cadet to your Profile:

- This applies whether it is your first cadet or any other additional cadet
- 1. Click “Find my Cadet”
- 2. Fill in the requested information
 - a. What you put in must reflect what is in Magellan.
 - b. Currently, only the primary contact of a cadet is able to create a parent profile
 - c. Your USNSCC ID Number is located on your ID card
- 3. Click “Attach cadet”

Parent's View of a Cadet Page

CADET USNSCC PROFILE

Cadet Information


Ryan North, SNIAN
Member Type: NSCC
Joined Date: 04/22/2018
Expiration Date: 07/30/2022

Cadet Advancement Status

Next Rank: PG3
Time in Grade (TIG): ✗
Time in Service (TIS): ✓
Courses: ✓
Exams: ✗
Training: ✗
Physical Readiness Test (PRT): ✓

Unit Information

Unit: 000TEST USNSCC TEST UNIT
Commanding Officer: LT Frederick Delanoz
Unit Phone: 888-888 8888
Unit Email: testunit@greencafe.org
Unit Website: www.usnsccadets.org
Meeting Address: U S NAVAL SEA CADET CORPS NATIONAL HQ
2300 WILSON BOULEVARD SUITE 200
ARLINGTON, VA 22201-5435
Drill Message: 2nd weekend of every month Saturday and
Sunday from 7:30 am to 4:00pm

CADET SERVICE JACKET




PARENT ACTIONS

3/21/2022
12:11:40 PM



PROFILE

3/21/2022
10:10:18 AM



MEDICAL
INFO

3/20/2022
2:35:57 PM



HEALTH
HISTORY

3/21/2022
10:51:26 AM



OVER-THE-COUNTER
MEDICATION

3/21/2022
5:46:02 PM



PRESCRIPTION
MEDICATIONS

3/21/2022
10:51:58 AM



ALLERGIES

3/21/2022
10:52:24 AM



AGREEMENTS



FIND
TRAININGS

CADET UPCOMING TRAININGS

Row	Dates	Event Code	Training	Eng Status	Actions
1	04/01/22-04/30/22	RT-NA-2201	Navy Shore, NSCC Recruit Training	Confirmed	Details

Parent's View of their Cadet's Page:

As a parent, you can see everything your cadet sees, other than Polaris.

You will also see Parent actions:

- Covered in a later section
- The timestamp notes the last time the information has been updated. If no timestamp exists, then it has not been entered and saved yet.
- All medical data is safely encrypted and secured on our site and only accessible to:
 - The Commanding Officer and anyone they have designated
 - Any Training's staff whose training the cadet has applied to

Profile

PARENT ACTIONS


PROFILE
3/21/2022 12:45:40 PM


MEDICAL INFO
3/21/2022 10:10:10 AM


HEALTH HISTORY
3/20/2022 2:12:52 PM


OVER-THE-COUNTER MEDICATIONS
3/21/2022 10:51:26 AM


PRESCRIPTION MEDICATIONS
3/21/2022 6:48:02 PM


ALLERGIES
3/21/2022 10:51:58 AM


AGREEMENTS
3/21/2022 10:52:24 AM


FIND TRAININGS

CADET PROFILE

First Name: ✓ Ryan

Middle Initial: ✓

Last Name: ✓ North

Gender: ✓ ☒ Male ☐ Female

Primary Phone: ✓ 888 (8888888) (Area code) (7 digit number)

Cell Phone: ✓ 888 (8888888) (Area code) (7 digit number)

Email: ✓ ED1788FB@seacadets.org

Home Address 1: ✓ 2300 Wilson Blvd

Home Address 2: ✓

Home City: ✓ Arlington

Home State: ✓ VA

Home Zip Code: ✓ 12345-6789

Home Country: ✓ United States

Full Time Student: ✓ ☐ Yes ☒ No

Grade: 9th

School Name: The Usncc School

School Address:

School GPA: 3.50

Cadet's Profile:

- Similar to the parent and volunteer profile page, here is where a parent can edit their cadet's contact information, address, and school information.
- Changing the email address will change where their Magellan emails will be sent.

Medical Information

PARENT ACTIONS

3/21/2022
12:11:40 PM



PROFILE

3/21/2022
10:19:16 AM



MEDICAL INFO

3/20/2022
2:32:57 PM



HEALTH HISTORY

3/21/2022
10:51:26 AM



OVER-THE-COUNTER MEDICATION

3/21/2022
8:46:02 PM



PRESCRIPTION MEDICATIONS

3/21/2022
10:51:58 AM



ALLERGIES

3/21/2022
10:52:24 AM



AGREEMENTS

3/21/2022
10:52:24 AM



FIND TRAININGS

CADET MEDICAL INFORMATION

✓ = required field

MEDICAL INSURANCE INFORMATION

Do You Have Medical Insurance? ☐ No ☒ Yes - Non TRICARE ☐ Yes - TRICARE

Medical Insurance Provider Name

Medical Insurance Policy Number

Medical Insurance Provider Phone

Medical Insurance Provider Address

Insurance Card Front None on File Choose File | No file chosen

Insurance Card Back None on File Choose File | No file chosen

MEDICAL PROVIDER INFORMATION

Medical Provider Name

Medical Provider Phone

MEDICAL HISTORY

Date of Last Physical Exam Choose File | No file chosen

Last Physical Form None on File

Date of last Tetanus (Td/Tdap) or booster? ☐ Yes ☒ No

Date of Menactra Vaccine for Meningitis ☒ Yes ☐ No 10/07/2020

Date of negative PPD or Medical Provider Clearance for TB ☐ Yes ☒ No Choose File | No file chosen

Immunization Record None on File

Americans with Disabilities Act (ADA)

Request for Accommodation: (Approved NSC-ADM001 pages 9 & 10) None on File Choose File | No file chosen

Cadet's Medical Information:

- **Insurance information** - If you do not have any insurance, you may enter none in the respective fields.
- **Medical Provider Information**
- **Medical History** - Here is where you will upload your cadet's most recent physical exam and immunizations record and report your required immunizations
- **Americans with Disabilities Act** - After receiving approval through the chain of command, you will upload an approved ADA accommodation form that is applicable.

This information will be available for Trainings to view before approving cadets' applications for training.

Health History

PARENT ACTIONS

3/21/2022
12:11:40 PM

PROFILE

3/21/2022
10:10:10 AM

MEDICAL INFO

3/20/2022
2:32:57 PM

HEALTH HISTORY

3/21/2022
10:01:20 AM

PHYSICIAN-COUNSELOR MEDICATIONS

3/21/2022
6:48:02 PM

PRESCRIPTION MEDICATIONS

3/21/2022
10:51:58 AM

ALLERGIES

3/21/2022
10:52:24 AM

AGREEMENTS

FIND TRAININGS

CADET HEALTH HISTORY

Condition	Yes	No	Remarks
Tuberculosis or live with someone with tuberculosis	☐	☒	
Chronic or recurrent abdominal or stomach pain	☐	☒	
Asthma or breathing problems related to exercise, pollen, etc.	☐	☒	
Been prescribed or use an inhaler	☐	☒	
Loss of vision in either eye	☐	☒	
Loss of hearing or wear a hearing aid	☐	☒	
Impaired use of arms, legs, hands, feet	☐	☒	
Knee problems	☐	☒	
Broken bone(s) (cracked or fractured)	☐	☒	
Diabetes	☐	☒	
Anemia (including sickle cell)	☐	☒	
Dizziness or fainting spells (including after exercise)	☐	☒	
Frequent or severe headaches	☐	☒	
Head injury or concussion	☐	☒	
Seizures, convulsions, epilepsy, or fits	☐	☒	
Cat, train, sea, and/or air sickness	☐	☒	
A period of unconsciousness	☐	☒	
Heart trouble or murmur	☐	☒	
Received counseling for emotional or behavior disorder	☐	☒	
Eating disorder (bulimia, anorexia)	☐	☒	
Sleepwalking	☐	☒	
Bedwetting	☐	☒	
Been hospitalized	☐	☒	(If yes, why, when, where)
Any illness or injury not mentioned above	☐	☒	(If yes, explain)
Advised to avoid certain physical activities	☐	☒	(If yes, explain)

Medical History:

- Be sure to report any illness or medical condition that may otherwise prevent your cadet from participating.
- In the remarks section, please put information including frequency, dates, or other relevant information for the safety of your cadet.
- This information is not shared with any external organization, including the U.S. Government, the U.S. Navy, and the rest of the armed services.

OTC Medications

PARENT ACTIONS											
	1/21/2022 12:11:40 PM		3/21/2022 10:10:16 AM		3/21/2022 2:32:57 PM		3/21/2022 10:51:26 AM		3/21/2022 5:46:02 PM		3/21/2022 10:51:58 AM
PROFILE		MEDICAL INFO		HEALTH HISTORY		OVER-THE-COUNTER MEDICATIONS		PRESCRIPTION MEDICATIONS		ALLERGIES	
AGREEMENTS											
RND TRAININGS											

sign report done

CARET OVER THE COUNTER MEDICATION LIST

THE FOLLOWING MEDICATIONS MAY BE ADMINISTERED BY OUR STAFF WHEN REQUESTED.

- Allergies: Benadryl
- Cough: Cough Medicine (Robitussin DM, Dimetane, etc.) / Throat/Cough Drops (Chloraseptic, Halls, etc.) / Dexamethasone (Steroid), etc.)
- Constipation: Milk of Magnesia, Dulcolax, S-Plus or Supository
- Cuts and Scrapes: Bacitracin ointment, Betadine, Neosporin ointment
- Earaches: Pain Reliever, Suspension, Instinct AD, etc.
- Hives/Irritation: Tylenol or Ibuprofen (Strom, Advil, Aleve)
- Indigestion: Calcium Carbonate (Tums, Rolaids, etc.)
- Nausea/Vomiting: Ondansetron (Zofran) or Zantac (acid reducer)
- Skin/Rash/Irritation: Diphenhydramine (Benadryl, etc.)
- Trauma: Acetaminophen/Tylenol or Ibuprofen (Strom, Advil, Aleve)
- Unconscious: Oxygenation, Tissue, resuscitate orally or via tube, etc.
- Wounds: Bacitracin ointment, Betadine, Neosporin Ointment

*Other medications not listed above may be administered if as recommended by qualified medical staff.
Parents will be contacted directly either over the counter medications need to be administered during and off duty.*

☒ Yes, I/we consent identified above THAT my permission to take any over the counter medications in accordance with label instructions as needed with the EXCEPT OF THE following:
☒ No, I/we consent identified above THAT I DO NOT have my permission to take any over the counter medications.

Over-The Counter Medication Exception	Remarks (optional)

CARET OVER THE COUNTER MEDICATION ADMINISTRATION AGREEMENTS

OTHER THE COMPANY'S MEDICATION ADMINISTRATION POLICY

I understand that all medications will be administered to the child based on dosing instructions on the medication bottle/package. In no instance will parents be allowed to self-medicate with any over the counter medication. [Signature]

MEDICAL PROVIDER SUPERVISOR POLICY

I understand and consent that these written instructions may be superseded if in the opinion of a medical provider, not doing so would place the child in a medically compromised condition. [Signature]

OVER THE COUNTER MEDICATION DEFINITIONS

I understand that PT do not want my child to be administered over the counter medications, or certain medications concurrent with other medications; I must specify those medications or write "Do not medicate my child with any over the counter medications" [Signature]

AUTHORIZATION AND RELEASE

I, [Parent Name], in the best of my knowledge, the information provided is true and accurate and I have disclosed all pertinent medical history. Furthermore, I agree that the Parent See Cedar Creek Child Care Center, its agents, officials, and training staff members, to dispense medication listed on this authorization. I most "consent" the Parent See Cedar Creek Child Care Center from any and all liability, actions, or causes of action for damages or injury that may arise, directly or indirectly, from my child's use of medication while participating in Non-Self Care Child Care Activities. I understand that having staff members may not be medical professionals and that medication will be dispensed according to the manufacturer's instructions under the instructions I provided on this authorization. [Signature]

OTC Medications:

- Select whether we can administer the above indicated over the counter medication at training
- Input any OTC medications you do not want the cadet to take if you are allowing us to administer some of them.

Rx Medication

3/21/2022
12:11:40 PM

PROFILE

3/21/2022
10:10:10 AM

MEDICAL INFO

3/20/2022
2:32:57 PM

HEALTH HISTORY

3/21/2022
10:51:26 AM

PRESCRIPTION MEDICATIONS

3/21/2022
6:46:02 PM

PRESCRIPTION MEDICATIONS

3/21/2022
10:51:58 AM

ALLERGIES

3/21/2022
10:52:24 AM

AGREEMENTS

FIND TRAININGS

Ryan North, SNIAN

ADD MEDICATION

PRESCRIPTION MEDICATIONS LIST

☐ Yes, the minor identified above 'DOES' take prescription medications that may need to be administered by the Naval Sea Cadet Corps.
 ☒ No, the minor identified above 'DOES NOT' take any prescription medications that may need to be administered by the Naval Sea Cadet Corps.

Row	Medication Name	Strength	Frequency and Dosage	Reason	Actions
1	Allergy Medicine	5mg	As Needed, as Labeled	Allergies	Details Edit Delete

NSCADM001 Pages 7 & 8 Upload

Approved NSCADM001 pages 7 & 8: None on File

Browse... No file selected.

PRESCRIPTION MEDICATIONS ACKNOWLEDGEMENTS

AUTHORIZATION AND RELEASE

I certify that, to the best of my knowledge, the information provided is true and accurate and I have disclosed all pertinent medical history. Furthermore, I authorize the Naval Sea Cadet Corps, its agents, officials, and training staff members, to dispense medication listed on this Authorization. I "Hold Harmless" the Naval Sea Cadet Corps from any and all liability, actions, or causes of action for damages or injury that may arise, directly or indirectly, from my child's use of medication while participating in Naval Sea Cadet Corps Activities. I understand that training staff members may not be medical professionals and that medication will be dispensed according to the manufacturer's instructions and/or the instructions I provided on this authorization.

☒ Acknowledge

SAVE

CANCEL

Prescription Medication:

- Information on this page will be shared with Trainings so they can ensure the proper administration of medication
- Approved NSCADM 001 Pages 7 and 8 (Rx Medication Report) uploaded here

19

Allergies

[illegible]

Allergies:

You will update any information here regarding a cadet's allergies. This can include dietary restrictions.

Agreements

PARENT ACTIONS

3/21/2022 12:11:40 PM PROFILE	3/21/2022 10:16:10 AM MEDICAL INFO	3/20/2022 2:32:57 PM HEALTH HISTORY	3/21/2022 10:51:26 AM PRESCRIPTION MEDICATIONS	3/21/2022 6:48:02 PM ALLERGIES	3/21/2022 10:51:58 AM FIND TRAININGS	3/21/2022 10:52:24 AM AGREEMENTS
--	---	--	---	---	---	---

Please check the Acknowledge checkbox for each subsection and then electronically sign the document on the bottom of page.

PARENTAL CONSENT AND ACKNOWLEDGEMENTS

PHOTO CONSENT

U.S. Naval Sea Cadet Corps may encounter the news media, video and film crew, or photographers hired by U.S. Naval Sea Cadet Corps for the purpose of taking promotional or publicity photographs, video or film. There is a possibility that cadets and adult training programs will be photographed. I/we give my consent to authorize U.S. Naval Sea Cadet Corps of the U.S. Navy League Corps, or any entity or person authorized or designated by them the use and reproduction or any and all photographs, video or film taken of the person named as the subject of this application during cadet training or related activities. I/we understand there will be no compensation to me. All negative and positives, together with said prints, video or film are the property of U.S. Naval Sea Cadet Corps of the U.S. Navy League Corps or the entity or person authorized or designated by it, solely and completely. I/we also waive any right to inspect or approve any photo, video or film taken during said training or related activities. I/we affirmatively release and discharge U.S. Naval Sea Cadet Corps of the U.S. Navy League Corps from responsibility for any distortion or manipulation, whether intentional or otherwise, of photos, video or film taken of my/our child while a participant in U.S. Naval Sea Cadet Corps Program.

☐ I hereby agree with the above stated Photo Consent.
☐ I DO NOT agree with the above stated Photo Consent for the reason of: _____

PARENT/LEGAL GUARDIAN AGREEMENT & CONFIRMATION

I hereby consent to my child/ward's enrollment in the U.S. Naval Sea Cadet Corps (USNSCC). I understand that the USNSCC is operated along military lines, that USNSCC regulations govern my child/ward's membership, and that violation of said regulations may result in my child/ward's discharge from the USNSCC. I will ensure that my child/ward abides by all regulations and lawful orders from superior officers and cadets. I certify that, to the best of my knowledge, he/she is physically and mentally fit to take part in rigorous activities. I have disclosed all physical/medical/disability limitations, and he/she is not suffering from any communicable disease. I further agree to be responsible for the value of any uniforms and/or equipment issued her/him, reassemble wear and tear expected. I understand that such uniforms or equipment shall remain the property of the USNSCC while on loan, and I agree to return them when my child/ward ceases to serve as a cadet, or at any other time upon request of a USNSCC officer or other authorized agent. I have been briefed on the USNSCC medical insurance plan. I am aware this is an accident/illness "excess" policy and that the limit of the policy is a total of \$25,000 for all accidental benefits/\$25,000 for illness with no deductibles. I understand that my personal medical insurance is the primary policy, but in the event that I do not have insurance and/or the USNSCC policy limits are exhausted, I understand that I am responsible for all medical payments above \$25,000 for accidents/\$25,000 for illnesses. I also understand that payment of enrollment fees will be required ANNUALLY, and payment of uniform fees may be required upon enrollment. I agree, on my child/ward's behalf, that he/she will be bound by all USNSCC regulations, policies, and amendments thereto that govern her/his membership and conduct. I further waive any right to challenge in any way any determination made by the USNSCC regarding my child/ward's continuance of membership in the USNSCC should he/she violate said regulations.

STANDARD RELEASE

I, being the parent/legal guardian of a member of the USNSCC, in consideration of her/his acceptance and continuance of membership in the USNSCC, hereby release from any and all claims, demands, actions, or causes of action due to death, injury or illness the following: (1) the government of the United States of America and all its departments and agencies; (2) any jurisdiction (state, county, city, town, district or other political subdivision) where official USNSCC activities take place; (3) the Navy League of the United States; (4) any organization or association, public or private, that sponsors USNSCC activities; (5) the USNSCC; (6) all officers, representatives, and agents, acting officially or otherwise of the previously mentioned jurisdictions, organizations, and associations. I hereby acknowledge that I have received and reviewed the AIO Bariatric Special Risk Insurance Rider (Policy SRO 915266) and the Consented Indemnity Company Liability Policy Certificate (Policy ENP005849, et al.) for the U.S. Naval Sea Cadet Corps & affiliated councils within the USA and its territories or possessions. I hereby consent to the examination and treatment of my child/ward by the medical facilities of the Department of Defense (DOD), U.S. Coast Guard (USCG), National Oceanographic and Atmospheric Administration (NOAA), U.S. Public Health Service (USPHS), or civilian physicians/medical facilities to determine physical status for participation in the USNSCC. I further authorize, as may be required, treatment in said facilities in the event of any illness or accident arising aboard DOD, USCG, or NOAA facilities or vessels, or during other authorized USNSCC activities. This consent includes any medical, anesthesia, or surgical treatment or hospital services rendered under the general and/or special instructions of the attending physician or other physicians assigned her/his care. This consent does not include major surgery. Unless, in the medical opinion of two physicians, it is reasonably necessary to have the, or other second opinions are similarly impracticable the consulting opinions of other physicians may be secured. I also grant permission for my child/ward to be transported as a passenger on military aircraft, vessels and vehicles. I consent to my child/ward being videotaped and/or photographed and to permit the reproduction and/or publication of same, or of any other videotapes or photographs by any photographic facility of the Department of Defense/Coast Guard or by the Navy League of the United States, its regional organization or local councils, or other sponsoring organization, or by the USNSCC or its divisions, or to their use in connection with educational programs or activities of the said organizations, and I further assign to the said organizations all right, title and interest in the above described videotape recordings or photographs for any further use. This standard release shall remain in effect for the duration of my child/ward's membership in the USNSCC. I also give my permission for facsimiles of this release to be made, and when presented by an authorized official of the USNSCC, DOD, USCG, NOAA, shall be considered as valid as the original signed by me.

ACKNOWLEDGE AND SAVE

Agreements:

- Confirmation of various Sea Cadet-related agreements.
- All of these agreements were previously located on enrollment documents.
- After acknowledging, you will enter your password to validate submission.
- We will capture your IP address at the time to refer to if there is a dispute regarding the approval of this information.

How to sign up for training



Video Link - <https://youtu.be/f9THQeAgN0Q>

How to sign up for a training:

1. Click “Find Trainings”
2. Select the training you or your cadet would like to attend
3. Select apply by the cadet’s name
4. If you are ineligible to attend, it will list the reason
5. Please contact your chain of command if you have any questions regarding this
6. Verify and or enter the information for each of the required forms
 - a. After you update this the first time, it will auto-populate for all future uses and only need to be reviewed.
7. Once everything has been completed, click “continue”
8. Acknowledge the statements on the following page, then click “register”
 - a. This will be changed to “applied” in future versions

Your cadet is now signed up for training, you can the training has been added to the “Upcoming Trainings” section of your Quarterdeck Dashboard

Training Statuses

Status	Description	Action taken by
Applied	Parent finds and applies for the Training	Parent
Submitted	CO Approved and submits an application to Training	CO
Confirmed	Training staff confirm the member can participate in the training. Cadet's spot is currently being held until payment or declination.	Training
Approved	Parent has sent and Training has logged the payment for the training. Member has completed the application process and is fully signed	Parent and Training
Declined	CO or Training has rejected the application. The member is not admitted to the training.	CO or Training

Training Statuses:

Here are the different statuses that can be shown regarding the training application process.