

INSTRUCTIONS FOR AIRPLANE PILOT QUALIFICATIONS AND APPROVAL RECORD

Note: Print legibly in ink.

SECTION I – Pilot Information (to completed by applicant pilot)

Blocks 1 through 4 – Self-explanatory

Block 5 – Enter Current Employer

Blocks 6 through 8 – Self-explanatory

Blocks 9 and 13 – Include employers for whom worked, whose flight environment qualifies pilot for the type of flying to be contracted.

Block 10 through 12 – Self-explanatory.

Block 14 through 16 – Self-explanatory.

Block 17 – If medical certificate expires during the contract period, prepare and send a copy of the new one to the inspector pilot.

Block 18 – Self-explanatory.

Block 19 – Enter contracted aircraft and total PIC hours in that make/model of aircraft.

Blocks 20 through 29 – Self-explanatory

Block 30 – Mountainous Terrain Flight-Flight conducted above terrain referenced in 14 CFR 95.11. In addition, mountainous terrain flight must be at or below 2500 feet AGL. The pilot must be able to verify flight meeting the requirements outlined in this definition.

Blocks 31 through 34 – Self-explanatory

Blocks 35 through 38 – Under the VFR, IFR, and IFR W/AP columns check (√) each that apply to the FAA Form 8410-3 for that check ride.

Blocks 39, 40, and 42 – OAS (Office of Aviation Services), Department of Interior and **USFS** (United States Forest Service), Department of Agriculture

Block 43 through 46 – Self-explanatory

Section II - Self-explanatory.

BURDEN AND NONDISCRIMINATION STATEMENTS

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0596-0015. The time required to complete this information collection is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotope, etc.) should contact USDA's TARGET Center at 202-720-2600 (voice and TDD).

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call toll free (866) 632-9992 (voice). TDD users can contact USDA through local relay or the Federal relay at (800) 877-8339 (TDD) or (866) 377-8642 (relay voice). USDA is an equal opportunity provider and employer.

PRIVACY ACT NOTICE

Collection and use of the information on this form covered under Privacy Act System of Records USDA/FS-44 (Pilot Qualification Records) and consistent with the provisions of 5 USC 552a (Privacy Act of 1974).

Purpose and Use: This information, along with data you may have supplied previously and information developed by investigation will be available to Federal employees for the following uses:

1. To determine your pilot qualifications to comply with contract specifications.
2. Transfer to the U.S. Department of Justice in the event of litigation.
3. Transfer, in the event there is indicated violation or potential violation of a statute, regulation, whether civil, criminal, or regulatory in nature, to the appropriate agency or agencies, whether Federal, state, local, or foreign, charged with the responsibility of investigation or prosecuting such violation or charged with enforcing or implementing the statute, rule, regulation, order or license violated or potentially violated.

AIRPLANE PILOT QUALIFICATIONS AND APPROVAL RECORD

(Reference FSH 5709.16)

▶ SECTION I - PILOT INFORMATION (Fill in the blanks) ◀

1. Name (Last, First, Middle Initial)		2. Date of Birth		3. Telephone No.	
4. Home Address (Street, City, State & Zip Code)					
5. Employed by		6. Address		7. Telephone No.	8. Employed since
9. Previous Employer		10. Address		11. Telephone No.	12. Period Employed
13. Previous Employer		14. Address		15. Telephone No.	16. Period Employed
17. Medical Certificate a. Class _____ b. Date _____		18. Airman Certificate (Check all that apply) a. Number _____ b. ATP c. Com d. Instrument e. SEL f. MEL g. SES h. MES i. CFI j. Type Ratings _____		19. Aircraft To Be flown (a) Total PIC Hours (b) 1. _____ 2. _____ 3. _____	
Flight Type		Hours		FAA FLIGHT CHECKS	
		Date		Make/Model A/C	VFR
				IFR	IFR W/AP
20. Total Pilot Time (Airplane)		35.			
21. Pilot-in-Command (PIC) Airplane		36.			
22. Total X-Country		37.			
23. Total Night		38.			
24. Instrument: In Flight		Note: FAA Flight Checks Must Cover Type of Operations Required By Contract.			
25. Instrument: Actual		39. Date of Previous Agency Card Approval		40. Date of Last Agency Flight Check	
26. Instrument: Simulated		a. OAS _____ b. USFS _____		a. OAS _____ b. USFS _____	
27. PIC Airplane: Last 12 Months		41. Aircraft Accidents/FAA Violations Filed Within Last 5 Years: No Yes (If yes, Attach Date and Explanation)			
28. PIC Airplane: Last 60 Days					
29. PIC "Low Level" Opns (-500 AGL)		42. Previous OAS or USFS Approval Denied, Suspended, or Revoked: (If yes, Attach Date and Explanation) No Yes			
30. PIC "Mountainous Terrain"					
31. PIC Aircraft over 12,500 # Gr. Wt.		43. PIC "Air Tactical" Operations: Number of Missions in the Last 24 Months: _____			
32. PIC Airtanker/Dispensing Operations		44. Airtanker Operations Only: a. Date Last PIC IFR Check in Type _____ b. Date Last FAR 61.55 SIC Check _____ c. No. of Takeoff/Landings Last 90 Days _____ d. No. of Night Takeoff/Landings Last 90 Days _____			
33. PIC, Single Engine Airplane		Land	I certify that the information listed on this form is true and correct. In addition, I certify that I have read the statements on the back of this form covering information pursuant to Public Law 93-579 (Privacy Act of 1974) and any amendment thereto.		
		Sea			
34. PIC, Multi-Engine Airplane		Land	45. Signature (Pilot)		46. Date
		Sea			

▶ SECTION II - For Inspectors Use Only (Initial appropriate Missions) ◀

1. Missions Approved For: (Inspector shall initial)				
Ski Operations	Recon	Airtanker Pilot (AKC/AKP/AKI/AKTP)	Leadplane	Mountainous Terrain
Remote Water Operations	Air Tactical	Airtanker (PIC/SIC)	Point to Point	Low Level
Back Country Airstrip	Sketch Mapping	Smokejumper (PIC/SIC)	Limitations	
Unprepared Landing Site	Infrared Operations	Seat Pilot Level (1/2)	Other	
		Paracargo	Other	
2. SEL _____ 3. SES _____ 4. MEL _____ 5. MES _____		6. IFR, W/SIC _____ 7. IFR, Single Pilot _____		8. Single Engine IFR _____
9. Type Aircraft Approved For:				
10. Print Name (Inspector)		11. Signature (Inspector)		12. Agency
		13. Issue Date	14. Expiration Date	
15. Aircraft/Contract Rental Agreement No(s).				

16. Remarks (Limit 7,000 charecters)

Empty rectangular box for entering remarks.