**PILOT APPLICATION (COMPLETE ENTIRE FORM)**

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| **PILOT HISTORY** | |
| PILOT NAME: | DAYTIME PHONE: # |
| ADDRESS: | |
| ADDRESS: | |
| DATE OF BIRTH: | DRIVER’S LICENSE #/STATE: |
| AIRMAN’S CERT.: # | MED. CLASS & EXP. DATE: |
| ARE YOU A STATE EMPLOYEE? Yes | AGENCY: |
| HOW OFTEN DO YOU FLY ON STATE BUSINESS? ANNUAL FLIGHTS:  ANNUAL HOURS: | PURPOSE OF FLYING ON STATE BUSINESS? |
| OCCUPATION: |  |

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| **If the answer to any of the following questions is yes, please give detail on separate sheet.** | **YES** | **NO** |
| Have you ever had any aircraft accidents? |  |  |
| Have you ever been cited for violations of civil/military aviation regulations? |  |  |
| Are you flying subject to limitations or a waiver? |  |  |
| Has your driver’s license ever been suspended or revoked? |  |  |
| Have you been arrested for operating a vehicle while under the influence of alcohol or drugs? |  |  |
| Have you had any automobile accidents within the last five years? |  |  |

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| CERTIFICATES / RATINGS | | |
| Indicate all certificates you currently hold: | | |
| Student  Private  Commercial | Airline (ATR)  Instructor  Instrument Rating | Single Engine Land  Multi Engine Land  Helicopter |
| List all aircraft type ratings you currently hold: | | |
| List all Manufacturer’s Ground and Flight Schools and dates you have attended for each aircraft make and model: | | |
| Indicate date of your last biennial flight review and list if it was VFR or IFR: | | |

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| FLYING EXPERIENCE IN LOGGED HOURS **PILOT-IN-COMMAND ONLY** | | | | | |
| **SPECIIFY ALL MAKE AND MODELS** | | **LAST 12 MONTHS** | **LAST 90 DAYS** | **TOTAL LOGGED HOURS** |  |
| **ALL SINGLE** |  |  |  |  | |
| **ENGINE** |  |  |  |  | |
| **FIXED WING/GEAR** |  |  |  |  | |
| **OR** |  |  |  |  | |
| **RETRACTABLE** |  |  |  |  | |
| **GEAR** |  |  |  |  | |
|  |  |  |  |  | |
| **MULTI ENGINE** |  |  |  |  | |
| **PISTON** |  |  |  |  | |
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|  |  |  |  |  | |
| **MULTI ENGINE** |  |  |  |  | |
| **TURBINE** |  |  |  |  | |
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| **HELICOPTER** | **PISTON:** |  |  |  | |
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| **HELICOPTER** | **TURBINE:** |  |  |  | |
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| AIRCRAFT INFORMATION | | | | |
| TYPES OF AIRCRAFT YOU OPERATE | YEAR | MAKE | MODEL | FAA# |
| **STATE OWNED AIRCRAFT:** |  |  |  |  |
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| **OWNED, BORROWED OR RENTED AIRCRAFT:** |  |  |  |  |
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|  |  |  |  |  |
| **Borrowed or owned private aircraft (attach certificate of insurance providing evidence of $1,000,000 minimum Aircraft liability including passengers)** | | | | |

I CERTIFY THAT THE STATEMENTS I HAVE MADE IN THE PILOT APPLICATION TO BE THE BEST OF MY KNOWLEDGE AND BELIEF.

PILOT SIGNATURE: DATE:

APPROVED BY: DATE:

FOR: -SEFG -SERG -MEU -HELI