**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