## COMMON FORMAL TRAINING PREREQUISITES

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| I. IDENTIFICATION DATA   | 2 DANIZ               |
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| 1. STUDENT NAME: (Last, First, Middle Initial) 2. COURSE TITLE Select from menu  | 3. RANK               |
|  |                       |
| 4. Scheduled Course Graduation date (MM/DD/YYYY):  |                       |
| II. PREREQUISITES  |                       |
| 5. Prerequisites (Instructions: The specific course manager will provide the prerequisites. The trainee/student or unit/wing initial and fill in all applicable areas prior to certification.)   | training manager will |
| INITIALS   |                       |
| 1. Physiological training is current for at least <b>30</b> days after course graduation date IAW syllabus.  |                       |
| 1a. Altitude Chamber expiration date:  |                       |
| 2. Flight physical (PHA) is current for at least <b>30</b> days after course graduation date IAW syllabus.   |                       |
| Must have active 2992: will NOT arrive in longterm DNIF status (>30days). Short DNIF on case by case basis if it doesn't interfere with training.  |                       |
| 2a. 2992 exp date:   |                       |
| 2b. Medical waivers must be current for at least <b>30</b> days past course graduation date.   | a.                    |
| Waiver expiration date:    N/A    **97 MDG will not process waiver paperwork*  |                       |
| 3. Security Clearance (minimum of SECRET) Verified in DISS & valid through class graduation date, or a rein prior to class start date IAW syllabus. Eligibility LVL: Date of Investigation   | nvestigation is open  |
| - Squadron Security Manager: I certify the above has been verified.  |                       |
| 4. Student has reviewed reporting instructions and has thoroughly read and agreed to abide by all policies in the AAFB Student Handbook located at <u>https://www.altus.af.mil/About-Us/New-Students/</u> prior to departing for training. (must use CAC email certificates) |                       |
| 5. E-mail 97TRS.Inprocessing@us.af.mil from a account you can access at Altus. (Normally a personal email)   | You will              |
| receive a Trackvia account activation e-mail and instructions.   | 10000                 |
| 6. Upload items listed below <b>NLT 2 weeks prior</b> to class start date to <b>TrackVia</b> .   |                       |
| Title emails to <u>97TRS.Inprocessing@us.af.mil</u> your last name, course and course start date (ex: <b>Smith_LIQ_mm/dd/yyyy</b> ).   |                       |
| 6a. TDY Orders (or PCS orders w/Altus TDY listed). i.e. 1610 (DTS), 938, 899, etc. Do not send your training RIP.  |                       |
| 6b. Medical: Email DD Form 2992 from most recent PHA.  |                       |
| 6c. Flight records: check course specific checklist.   |                       |
| 6d. Current printout of AFFMSSII (Fitness Report). Scored/signed scorecards are acceptable if report is unavailable.   |                       |
| 6e. Copy of DoD Mobile Device CBT certificate https://public.cyber.mil/training/dod-mobile-devices/  |                       |
| 6f. Copy of this completed checklist AND course specific checklist signed by Sq/CC or authorized representative  |                       |
| (DO, training shop, etc.)  |                       |
| 7. Student does not have leave scheduled for the period of time covering the TDY.  |                       |
| <ol> <li>8. Student has signed up for Mattermost and has added the 97 TRS team and student channels.</li> <li>8a. Detailed instructions are available at https://www.altus.af.mil/About-Us/New-Students/.</li> </ol>   |                       |
| 8b. USER ID for licenses:  |                       |
| <ul><li>9. Student will arrive by 0715 on class start date for in-processing at building 87, 1st floor, Student Admin. Do</li></ul>  | ors open at 0700.     |
| Failure to complete prerequisite items will result in the student being returned to their up   | nit.                  |
|  |                       |
| III. COMMANDER OR COMMANDER'S AUTHORIZED REPRESENTATIVE CERTIFICATION/ACKNOWLEDG<br>I certify and acknowledge, all course prerequisites listed above have been verified and accomplished. Students not meeting   |                       |
| prerequisites will not proceed to training unless the appropriate waiver is obtained. The member has been instructed to email this form along  |                       |
| with any other documentation described above. Additionally, this form will serve as a certification of the course prerequisit  |                       |
| produce this form for in-processing can result in a training delay or removal from the course. The student will not be entered until all prerequisites have been verified.   | ed into training      |
| NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION   |                       |
|  |                       |
|  |                       |
|  |                       |
| SIGNATURE  | DATE                  |