FO	RMAL TRAINING PREREQUISITES	
I. IDENTIFICATION DATA		
1. STUDENT NAME: (Last, First, Middle Initial)	2. COURSE TITLE C-17 Loadmaster Airdrop (LAD)	3. RANK
4. Scheduled LAD Graduation date (MM/DD/YY)	YY):	
II. PREREQUISITES	,	
will initial and fill in all applicable areas prior to cer	manager will provide the prerequisites. The trainee/student or unit/wing tra- tification.)	ining manager
INITIALS 1. Periodic flight evaluation(s) must Memo. 3a. Evaluation Expiration of	be current for at least 30 days after course graduation date IAW 97 OG/C late (AC27Y or AA01):	CC Policy
2. Mandatory grounding items should	d be current for at least 30 days after course graduation date IAW 97 TRS	Policy.
2a. Emer Egress exp date (LL03):	2b. Aircrew Flight Equipment exp date (LL06):	
2c. AFE fit test (LL07):	2d. Emergency Parachute training exp (SS06/SS31/	/SS35):
Please enter completion date for thes	e one time items:	
2e. Marshalling Tng Exam (GD11Y)	2f. AFE Familiarization (LL01):	
2g. Local area survival (SS01):		
3. Members are required to bring their of provided by AAFB AFE .	own <i>personally fitted</i> oxygen mask for use during the LAD course. Masks will No	OT be
3a. Flight records: copy of ARMS II	s.af.mil your last name, course and course start date (ex: Smith_LAD_mm/dd/yy	
5. Complete all items on Common F	formal Training Prerequisites checklist in addition to this course specific o	ne.
Failure to complete pre	requisite items will result in the student being returned to their unit.	
I certify and acknowledge, all course prerequisites prerequisites will not proceed to training unless the with any other documentation described above. Ad	THORIZED REPRESENTATIVE CERTIFICATION/ACKNOWLEDGE listed above have been verified and accomplished. Students not meeting a appropriate waiver is obtained. The member has been instructed to email ditionally, this form will serve as a certification of the course prerequisite training delay or removal from the course. The student will not be entered	course il this form along es. Failure to
until all prerequisites have been verified.		
NAME, GRADE, BR OF SVC, ORGN, COMD, I	LOCATION	
DUTY TITLE		
SIGNATURE		DATE