	FO	RMAL TRAINING PREREQUISITES		
I. IDENTIF	ICATION DATA	_		
1. STUDEN	IT NAME: (Last, First, Middle Initial)	2. COURSE TITLE C-17 Loadmaster Airdrop (LAD)	3. RANK	
4. Schedule	ed LAD Graduation date (MM/DD/YY)	( <b>Y</b> ):		
II. PREREQUISITES				
5. Prerequisites (Instructions: The specific course manager will provide the prerequisites. The trainee/student or unit/wing training manager will initial and fill in all applicable areas prior to certification.)				
INITIALS				
	<ol> <li>Periodic flight evaluation(s) must be current for at least <b>30</b> days after course graduation date IAW 97 OG/CC Policy Memo. 3a. Evaluation Expiration date (AC27Y or AA01):</li> </ol>			
	2. Mandatory grounding items should 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 (S	S06/SS31/SS35):	
	Please enter completion date for these one time items:			
	2e. Marshalling Tng Exam (GD11Y)			
	2g. Local area survival (SS01):			
	<ol> <li>Upload items listed below NLT 2 weeks prior to class start date to TrackVia</li> <li>Title emails to <u>97TRS.Inprocessing@us.af.mil</u> your last name, course and course start date (ex: Smith_LAD_mm/dd/yyyy)</li> </ol>			
	<ul><li>3a. Flight records: copy of ARMS IDS &amp; ARMS ITS.</li><li>3b. Copy of this completed checklist AND common checklist signed by Sq/CC or authorized representative (DO, training shop, etc.)</li></ul>			
	<ol> <li>Complete all items on Common Formal Training Prerequisites checklist in addition to this course specific one.</li> <li>Failure to complete prerequisite items will result in the student being returned to their unit.</li> </ol>			
I certify and prerequisites with any oth produce this	acknowledge, all course prerequisites s will not proceed to training unless the ner documentation described above. Ac	HORIZED REPRESENTATIVE CERTIFICATION/ACKNO listed above have been verified and accomplished. Students no e appropriate waiver is obtained. The member has been instruct lditionally, this form will serve as a certification of the course p training delay or removal from the course. The student will not	t meeting course ted to email this form along prerequisites. Failure to	
	ADE, BR OF SVC, ORGN, COMD, I	LOCATION		
DUTY TIT	LE			
SIGNATURE DATE				