

## FORMAL TRAINING PREREQUISITES

### I. IDENTIFICATION DATA

1. STUDENT NAME: (Last, First, Middle Initial)	2. COURSE TITLE KC-135 Pilot Transition Course 2 (PTX2)	3. RANK
4. Scheduled PTX Graduation date (MM/DD/YYYY):		
5. COURSE DESCRIPTION: KC-135PTX2 qualifies previous KC-135/KC-10/C-17/C-5 Aircraft Commanders, who have been unqualified in said aircraft up to 8 years IAW AFMAN 11-2KC-135V1, as KC-135 Aircraft Commanders. Former KC-135 Instructor Aircraft Commanders may re-qualify as instructors with a waiver.		

### II. 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.)

<b>INITIALS</b>	<ol style="list-style-type: none"> <li>1. Total Flying Hours (FAIP/OSA) required: <b>800</b> IAW MAF Experiencing Memo.                             <ol style="list-style-type: none"> <li>1a. Students actual total flying hours: _____</li> <li>1b. If less than <b>800</b>, home unit OG waiver is completed and attached.</li> </ol> </li> <li>2. Previous Aircraft Commander (select one): KC-135    KC-10    C-17    C-5                             <ol style="list-style-type: none"> <li>2a. Date Unqualified in selected Aircraft: _____                      PTX2 Class Start Date: _____</li> </ol> </li> <li>3. Do you intend to seek instructor requalification?    Yes      No                              Student will not requal as an instructor unless the gaining unit's Sq/CC sends a request and approved waiver to <a href="mailto:97TRS.TRT@us.af.mil">97TRS.TRT@us.af.mil</a> and <a href="mailto:97TRS.Inprocessing@us.af.mil">97TRS.Inprocessing@us.af.mil</a> prior to class start date. Student must have been a previous KC-135 instructor unqualified for 8 years or fewer IAW AFMAN 11-2KC-135 V1 and will require a waiver from MAJCOM/A3T (para 2.9.2.2)</li> <li>4. Upload items listed below <b>NLT 2 weeks prior</b> to class start date to <b>TrackVia</b>                              Title emails to <a href="mailto:97TRS.Inprocessing@us.af.mil">97TRS.Inprocessing@us.af.mil</a> your last name, course and course start date (ex: <b>Smith_PTX2_mm/dd/yyyy</b>).                             <ol style="list-style-type: none"> <li>4a. Flight Records: Email copy of ARMS IDS and Flying History Report.</li> <li>4b. Email copy of most recent Periodic Qual Eval Form 8 with expiration date in block II for the aircraft selected above, or final ARMS ITS from your last assignment for aircraft selected above.</li> <li>4c. Email copy of Altitude Chamber card (showing current for 30 days past grad date).</li> <li>4d. Copy of this completed checklist AND common checklist signed by Sq/CC or authorized representative (DO, training shop, etc.)</li> </ol> </li> <li>5. Complete all items on the Common Formal Training Prerequisites Checklist in addition to this course specific one.</li> </ol> <p style="text-align: center; color: red; font-weight: bold; margin-top: 20px;">Failure to complete prerequisite items will result in the student being returned to their unit.</p>
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### III. COMMANDER OR COMMANDER'S AUTHORIZED REPRESENTATIVE CERTIFICATION/ACKNOWLEDGEMENT

I certify and acknowledge, all course prerequisites listed above have been verified and accomplished. Students not meeting course 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 prerequisites. Failure to produce this form for in-processing can result in a training delay or removal from the course. The student will not be entered into training until all prerequisites have been verified.

NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION	
DUTY TITLE	
SIGNATURE	DATE