

FORMAL TRAINING PREREQUISITES

I. IDENTIFICATION DATA

1. STUDENT NAME: (Last, First, Middle Initial)	2. COURSE TITLE KC-46 Pilot Transition Course 2 (PTX2)	3. RANK
<input type="text"/>		<input type="text"/>
4. Scheduled PTX Graduation date (MM/DD/YYYY): <input type="text"/>		
5. COURSE DESCRIPTION: Qualifies pilots who were previously qualified as non-receiver KC-135 Aircraft Commanders as KC-46 Aircraft Commanders.		

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.)

INITIALS	<div>1. IAW 19AF Waiver previously qualified as a aircraft commander in the fixed-wing aircraft may attend PTX2.</div> <div>Previous Aircraft NA</div> <div>2. IAW 19AF Waiver KC-135 and KC-10 Co-pilots with 200 PAA Hours (Pri+Sec Including Sim) may attend PTX2.</div> <div>Previous Tanker Aircraft PAA Hours NA</div> <div>3. IAW 19AF Waiver Non-Tanker Co-pilots with 400 PAA Hours (Pri+Sec Including Sim) may attend PTX2.</div> <div>Previous Non-Tanker Aircraft PAA Hours NA</div> <div>4. Upload items listed below NLT 2 weeks prior to class start date to TrackVia Title emails to 97TRS.Inprocessing@us.af.mil your last name, course and course start date (ex: Smith_PTX2_mm/dd/yyyy).</div> <div>4a. Flight records: ARMS IDS, Flying History Report, and ARMS ITS with CE09Y ILS PRM.</div> <div>4b. Copy of most recent Periodic Qual Eval Form 8 with expiration date in block II.</div> <div>4c. Copy of this completed checklist AND common checklist signed by Sq/CC or authorized representative (DO, training shop, etc.)</div> <div>5. Complete all items on the Common Formal Training Prerequisites Checklist in addition to this course specific one.</div> <div>Failure to complete prerequisite items will result in the student being returned to their unit.</div>
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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

<input type="text"/>	
DUTY TITLE	<input type="text"/>
SIGNATURE	DATE <input type="text"/>