

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><input type="text"/></div> <p>1. IAW 19AF waiver dated 20 May 24*, individuals must meet one of the following criteria (please check one, a or b):</p> <p>a. Individuals must be previously qualified as MWS aircraft commanders in fixed wing military aircraft. MWS aircraft in which student was an aircraft commander:</p> <p>-OR-</p> <p>b. Individuals must be previously qualified FAIP/OSA aircraft commander with 800 hours Total Flying Time [Note: TFT represents all flying time logged aboard a fixed-wing aircraft as a military pilot, including MDS simulator time (FAA level C equivalent). Exception: TFT does not include time in another aircrew specialty, UPT student, or RPA time.]</p> <p>FAIP/OSA Aircraft:</p> <p>Total Flying Time:</p> <p>* NOTE: This waiver expires upon the publication of the initial KC-46 PTX1 syllabus, or 20 May 25, whichever occurs first.</p> <p>2. Upload items listed below NLT 2 weeks prior to class start date to TrackVia</p> <p>2a. Flight records: ARMS IDS, Flying History Report, and ARMS ITS with CE09Y ILS PRM.</p> <p>2b. Copy of most recent Periodic Qual Eval Form 8 with expiration date in block II (for aircraft indicated in item 1).</p> <p>2c. Copy of this completed checklist AND common checklist signed by Sq/CC or authorized representative (DO, training shop, etc.)</p> <p>3. Complete all items on the Common Formal Training Prerequisites Checklist in addition to this course specific one.</p> <p>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

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

25 Jul 2024