FORMAL TRAINING PREREQUISITES	
I. IDENTIFICATION DATA	La an innumination
1. STUDENT NAME: (Last, First, Middle Initial) 2. COURSE TITLE	3. GRADE/RANK
KC-135 Pilot Transition Course 3 (PTX3) Prerequisite Checklist	
4. Scheduled PTX Graduation date (MM/DD/YYYY):	
5. COURSE DESCRIPTION: KC-135 PTX3 re-qualifies former KC-135 Aircraft Commanders and Instructor Aircraft Command Must be unqualified less than 39 months at the end of a non-flying assignment, or less than 51 montactive (or current) flying assignment IAW AFI 11-2KC-135V1.	
II. PREREQUISITES (Instructions: The specific course manager will provide the prerequisites. The trainee/student or unit/manager_will initial and fill in all applicable areas prior to certification.)	wing training
INITIALS  1. Physiological training is current for at least 30 days after course graduation date IAW syllabus.	
1a. Altitude Chamber expiration date:	
2. Flight physical (PHA) is current for at least 30 days after course graduation date IAW syllabus.  Must have active 2992: will NOT arrive in DNIF status.  2a. PHA due date:  2b. Medical waivers must be current for at least 60 days past course graduation date.	
Waiver expiration date: N/A	
3. Student at end of which assignment type: Flying Non-Flying  3a. Date Unqualified: PTX3 Class Start Date:	
3a. Date Unqualified: PTX3 Class Start Date: 4. Security Clearance (minimum of SECRET) Verified in JPAS & valid through class graduation date, or a rein	wastigation is
open prior to class start date IAW syllabus.	ivestigation is
5. USAF Active Duty requires a <b>36</b> month ADSC, IAW AFI36-2107, Table 1.1, Rule 16, and the ETCA websi students follow home unit procedures.	te. Guard and reserve
6. 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 to 97.TRS.TRT@us.a start date. Student must have been a previous KC-135 instructor unqualified for 8 years or fewer IAW AFI11-	f.mil prior to class 2KC-135 V1.
7. Student must be previously tactics certified and must bring documentation to support. (ie AF1381, Letter of	X's, or 4025)
8. Student has reviewed reporting instructions and has thoroughly read and agreed to abide by all policies in the Handbook located at <a href="https://app10-eis.aetc.af.mil/etca/SitePages/Home.aspx">https://app10-eis.aetc.af.mil/etca/SitePages/Home.aspx</a> prior to departing for training. (n certificates)	
9. Email this checklist completed electronically and attach all the items listed below in one email.	
Title email your last name and course start date (ex: Smith_PTX3 mm/dd/yyyy).	
Send <b>NLT 1 week prior</b> to class start date to Student Admin at <u>97TRS.Inprocessing@us.af.mil</u>	
9a. Copy of TDY orders.	
9b. Medical: Email DD Form 2992 from most recent PHA.	
9c. Flight records: Email copy of ARMS IDS & Flying History Report and hand carry entire flight records folder (HAR)	<b>М</b> ).
9d. Email copy of Altitude Chamber card (showing current for 30 days past grad date).	
9e. Email copy of most recent KC-135 Periodic Qual Eval Form 8 with expiration date in block II, or final ARMS ITS from 100 periodic Qual Eval Form 100 periodic Qual Eval Eval Eval Eval Eval Eval Eval Ev	om KC-135 assignment.
9f. Documentation of previous tactics cert.	
9g. Current printout of Air Force AFFMSII (Fitness Report).	
9h. Copy of this completed checklist signed by Sq/CC.	
10. Student will arrive at <b>0715</b> on class start date for in-processing at building 87.	
III. COMMANDER OR COMMANDER'S AUTHORIZED REPRESENTATIVE CERTIFICATION/ACKNOWLEDG	
I certify and acknowledge, all course prerequisites listed above have been verified and accomplished. Students not meeting	
prerequisites will not proceed to training unless the appropriate waiver is obtained. The member has been instructed to emate with any other documentation described above. Additionally, this form will serve as a certification of the course prerequisit	
produce this form for in-processing can result in a training delay or removal from the course. The student will not be entered until all prerequisites have been verified.	
NAME, GRADE, BR OF SVC, ORGN, COMD, LOCATION	
D. VANY MARK T	
DUTY TITLE	To 4 mg
SIGNATURE ———	DATE