

FORMAL TRAINING PREREQUISITES

I. IDENTIFICATION DATA

1. STUDENT NAME: (Last, First, Middle Initial) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	2. COURSE TITLE C-17 Aircraft Commander Initial Qualification (ACIQ) Prerequisite Checklist	3. GRADE/RANK <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
4. Scheduled ACIQ Graduation date (MM/DD/YYYY): <div style="border: 1px solid black; width: 150px; display: inline-block;"></div>		
5. COURSE DESCRIPTION: C17 ACIQ qualifies former C-17 pilots (unqualified over 8 years), or crossflow aircraft commanders from other MDS (fixed-wing recommended) aircraft as C-17 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 style="border: 1px solid black; height: 20px; width: 100%;"></div>	1. Total Flying Hours (Fixed Wing/non-RPA) required: 1000 IAW AFI 11-2C-17 V1. 1a. Student's Actual Total Flying Hours (Grand Total time plus simulator time): <div style="border: 1px solid black; width: 100px; display: inline-block;"></div> 1b. If required, home unit OG waiver is completed and attached.
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	2. Physiological training is current for at least 30 days after course graduation date IAW syllabus. 2a. Altitude Chamber expiration date: <div style="border: 1px solid black; width: 100px; display: inline-block;"></div>
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	3. 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. 3a. PHA due date: <div style="border: 1px solid black; width: 100px; display: inline-block;"></div> 3b. Medical waivers must be current for at least 60 days past course graduation date. Waiver expiration date: <div style="border: 1px solid black; width: 100px; display: inline-block;"></div> N/A <input type="checkbox"/>
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	4. Security Clearance (minimum of SECRET) Verified in JPAS & valid through class graduation date, or a reinvestigation is open prior to class start date IAW syllabus.
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	5. USAF Active Duty requires a 36 month ADSC, IAW AFI 36-2107, Table 1.1, Rule 16. Guard and reserve students follow home unit procedures.
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	6. Student has reviewed reporting instructions and has thoroughly read and agreed to abide by all policies in the AAFB Student Handbook located at https://app10-eis.aetca.af.mil/etca/SitePages/Home.aspx prior to departing for training. (must use CAC email certificates)
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	7. Email this checklist completed electronically and attach all items listed below in one email. Title email your last name and course start date as the title (ex: Smith_ACIQ_mm/dd/yyyy). Send NLT 1 week prior to class start date to Student Admin at 97TRS.Inprocessing@us.af.mil 7a. Copy of TDY orders. 7b. Medical: Email DD Form 2992 from most recent PHA. 7c. Flight records: Copy of ARMS IDS & Flying History Report and hand carry entire flight record folder (HARM). 7d. Current printout of AFFMSII (Fitness Report). 7e. Copy of this completed checklist signed by Sq/CC.
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	8. Student will arrive 0715 on class start date for in-processing at building 87.

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