



U.S. Department of Transportation  
Federal Aviation Administration

Supplemental Qualifications Statement  
FOR 1825 AND 2181 SERIES

<b>1. Name</b> (First, MI, Last)	<b>2. Date of Birth</b> (Mo/Da/Yr)	<b>3. Social Security Number</b>
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4. AIRMAN CERTIFICATES HELD		
Type	Date Issued	Certificate No.
Airline Transport Pilot		
Commercial Pilot		
Private Pilot		
Flight Instructor		

**5. PILOT RATING RECORD** Indicate certificate privileges for the ratings listed below by writing "A" for Airline Transport, "C" for Commercial or "P" for Private in column 1. Write an "F" for Flight Instructor Rating in column 2, where appropriate

1		2		Type Ratings: (specify)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Glider
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rotorcraft Helicopter
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rotorcraft Gyroplane
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lighter-than-air Free Balloon
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lighter-than-air Airship
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**6. TEST PILOT EXPERIENCE**

Flight Test Pilot	Name of Company or Organization	Date Employed	Fixed Wing Hours	Roto-Craft Hours
Production Test Pilot	Name of Company or Organization	Date Employed	Hours	Hours

7. FAA DESIGNATIONS AND AUTHORIZATIONS	Date Issued	8. TYPE AND TOTAL FLIGHT HOURS				9. AIRCRAFT			
		Total Hours Flown to Date				Total Hours Flown to Date			
		Airplane		Rotorcraft		Make/Model/Series	PIC	SIC	Flt Engr
		PIC	SIC	PIC	SIC				
Designated Pilot Examiner		Total Pilot Time							
Pilot Proficiency Examiner		Single Engine							
Designated Flight Engineer Examiner		Twin Engine							
		Three or more Engine							
Designated Aircraft Dispatcher Examiner		Multiengine over 12,500 lbs maximum Certificated Takeoff Weight							
Check Airman		Turbine Powered							
Aircrew Program Designee		Turbo Powered							
Designated Airworthiness Representative		Actual Instrument							
		Hood Instrument							
Designated Manufacturing Inspection Representative		Flight Simulator							
		Night							
Designated Engineering Representative		Total Flight Instructor							
		Instrument Instructor							
Designated Parachute Rigger Examiner		Multiengine Instructor							
		Total in Last 12 Months							
		Total in Last 3 Years							
		Total in Last 5 Years							