Clear Form

CONTRACTOR CREWMEMBER FLIGHT SUMMARY

OMB No. 0704-0347
Expires: November 30, 2026

Privacy Act Statement

AUTHORITY: 27 U.S.C. 310a, Public Law 92-204; Public Law 93-294; DODD 7730.57

PURPOSE AND USE: This form is intended to serve as a summary of an individual's flight record to support the contractor crewmember approval process.

ROUTINE USE: May be disclosed for any of the blanket routine uses published by the DoD. **DISCLOSURE IS VOLUNTARY**: However, failure to provide information may prevent authorization to perform duties in aircraft under Government contract.

1. NAME OF CREWMEMBER *(Last Name, First, Middle Initial):*

2. CONTRACTOR REPRESENTED *(Name and address)*

3. MISSION, DESIGN, AND SERIES (MDS) AIRCRAFT OR OTHER REQUIREMENT FOR THIS QUALIFICATION:

4a. IDENTIFY CREW POSITION AND QUAL:

4b. MISSION TYPE: ☐ EXPERIMENTAL ☐ ENGINEERING ☐ FUNCTIONAL CHECK ☐ MAINTENANCE TEST ☐ SUPPORT

5. REASON FOR SUBMISSION:

☐ INITIAL QUAL ☐ REQUAL ☐ UPGRADE TRNG ☐ QUALIFIED NEW HIRE OTHER:

SECTION I – FLIGHT EXPERIENCE *(Time to nearest hour)*

6. FLYING TIME BY TYPE

JET HRS TURBO PROP HRS UNMANNED HRS ROTARY/TILTROTOR HRS

7. TOTAL FLYING TIME

8. AIRCRAFT MDS (Date Last Flown)	PERIOD OF TIME	9. PILOT-IN-COMMAND	10. COPILOT	11. INSTRUCTOR / EVALUATOR	12. NIGHT	13. IMC	14. SIM	15. EXP TEST	16. ENG TEST	17. OTHER
	Last 12 months									
	Total									
	Last 12 months									
	Total									
	Last 12 months									
	Total									
	Last 12 months									
	Total									
	Last 12 months									
	Total									
	Last 12 months									
	Total									
	Last 12 months									
	Total									

Controlled By:
Controlled By:
CUI Categories: PROPIN/PRVCY Distribution/
Dissemination Control: FEDCON
POC:

SECTION II ADDITIONAL REQUIREMENTS *(Fill in where applicable)*			
REQUIREMENTS	**CHECKED BY**	**DATE**	**PLACE**
18. PHYSICAL EXAM			
19. PHYSIOLOGICAL TRNG			
20. CENTRIFUGE TRNG			
21. ACFT EGRESS/EVAC TRNG			
22. AFE/ALSE/ALSS TRNG			
23. CRM/ACT TRNG			
24. LAND SURVIVAL TRNG			
25. WATER SURVIVAL TRNG			
26. OTHER:			

27. HAVE YOU EVER HAD AN AIRCRAFT ACCIDENT *(as defined by FAR or military procedures)* OR PHYSIOLOGICAL REACTION *(e.g. hypoxia, decompression sickness, spatial disorientation)* AS A PILOT, OR OTHER CREW MEMBER? *(If yes, explain.)*

28. HAVE YOU EVER BEEN CHARGED WITH A FLYING VIOLATION? *(If so, state the violation and circumstances.)*

29. LIST ALL FAA CERTIFICATIONS, LICENSES, RATINGS, QUALIFICATIONS, ETC. (For additional space use blank sheet.)

30. I certify that all information listed on this form is accurate and I can provide source documentation if requested.

Date	Signature of Crewmember

Contractor Crewmember Flight Summary Instructions

1. Name of Crewmember – self-explanatory
2. Contractor Represented – self-explanatory
3. MDS Aircraft, Crewmember Qual, and/or Other Requirements for this Qualification – self-explanatory

4a. Identify Crew Position – MDS Crew position (Pilot, Co-Pilot, Crew Chief, WSO, etc.)

4b. Mission Type - Mission qualification level sought; should match DD2627 and DD2628

5. Select the reason for the crewmember record review

Section I. Complete all times by rounding to the nearest hour:

6. Flying Time by Type – self-explanatory
7. Total Flying Time – self-explanatory
8. MDS and Date Last Flown – Input applicable MDS. Like series aircraft may be grouped. Insert date last flown below aircraft MDS. Use a separate sheet for additional aircraft.
9. Pilot-in-Command – for the purposes of this summary record, document the time as the designated aircraft commander (not necessarily at the controls)
10. Copilot – document time in which crewmember records flight time but is not the aircraft commander
11. Instructor/Evaluator – input combined instructor and evaluator hours as applicable
12. Night – self-explanatory
13. IMC – actual and/or simulated
14. Sim – self-explanatory
15. Experimental Test – input hours for experimental test as defined in the 8210-1 and acting as the aircraft commander
16. Engineering Test – input hours for engineering test as defined in the 8210-1 and acting as the aircraft commander
17. Other – for pilots: input time when not occupying a designated duty station or conforming to the requirements of PIC or Copilot time. All other crewmembers (e.g., navigators, loadmasters, sensor operators) may log flight time here.

Section II. Additional Requirements:

18. – 26. Additional Requirements – input the date & location of most recent training/event and whom validated completion
27. – 28. Aircraft accident or physiological reaction & flying violation – self-explanatory
29. List FAA Qualifications – include all FAA qualifications, licenses, ratings, and certifications held
30. Read statement and sign to certify compliance and accuracy of records