

DEPARTMENT OF HOMELAND SECURITY
U.S. COAST GUARD

PILOT EXPERIENCE SHEET

Name (Last, First, MI): _____ Date: _____

NOTE: This form must be completed in full.

1a. Military Flight Time TOTAL: _____

	TYPE ACFT	TOTAL PILOT TIME	ACFT CDR TIME	INSTRUCTOR PILOT TIME	INSTRUMENT TIME
F/W Multi Engine					
F/W Single Engine					
R/W Multi Engine					
R/W Single Engine					

1b. Formal Military Training (Check appropriate box):

☐ Flight Safety Officer

☐ Aircraft Maintenance Officer

2. Civil Flight Time TOTAL: _____

	TYPE ACFT	TOTAL PILOT TIME	ACFT CDR TIME	INSTRUCTOR PILOT TIME	INSTRUMENT TIME
F/W Multi Engine					
F/W Single Engine					
R/W Multi Engine					
R/W Single Engine					

3. FAA Pilot Ratings Held:

4. Date Commissioned: _____ Source: _____

5. Date of First Flight, as an Officer, in Military Aircraft: _____

6. Flight Training Source: _____

Pipeline (Check appropriate box(es)):

☐ RW

☐ FW

☐ Both

Date Graduated: _____

7. Date Last Flew Military A/C: _____ Type: _____

8. Date Last Flew Civil A/C: _____ Type: _____