GS 1815, 1825, 2181

SUPPLEMENTAL QUALIFICATIONS STATEMENT

Form Approved:
OMB No. 50-R0481

RECORD OF AERONAUTICAL EXPERIENCE

Complete and Submit this Form with Your Personal Qualifications Statement

1. Name	2. Date of Birth	3. Social Security Number

4. AIRMAN CERTIFICATES HELD

Type	Date Issued	Certificate Number
A. Airline Transport Pilot		
B. Commercial Pilot		
C. Private Pilot		
D. Flight Instructor		
E. Mechanic		
1. Airframe		
2. Powerplant		
F. Flight Engineer		
1. Turbo Jet		
2. Recip		
3. Turbo Prop		
G. Medical		Class: First Second Third

5. RATING RECORD

Indicate certificate privileges for ratings below by showing appropriate letter in column 1.
A = Airline Transport B = Commercial C = Private
Show letter D for Flight Instructor Rating in column 2, where appropriate.

1	2	
		Airplane Single Engine Land
		Airplane Single Engine Sea
		Airplane Multiengine Land
		Airplane Multiengine Sea
		Instrument Airplane
		Instrument Helicopter

1	2	
		Glider
		Helicopter
		Gyroplane

☐ Other Ratings (Specify)

☐ Type Ratings (Specify)

6. Classification of Flying Hours	Total Last 12 Months	Total Hours To Date	
Type and Total Hours		Pilot-in-Command	Co-Pilot
A. Total Pilot Time			
B. Single Engine			
C. Twin Engine			
D. Four Engine			
E. Multiengine Less Than 12,500 lbs. Gross Weight			
F. Multiengine More Than 12,500 lbs. Gross Weight			
G. Jet			
H. Actual Instrument			
I. Hood Instrument			
J. Synthetic Trainer			
K. Flight Simulator			
L. Rotorcraft			
M. Night			
N. Primary Instructor			
O. Advanced Instructor			
P. Instrument Instructor			
Q. Multiengine Instructor			
R. Scheduled Air Carrier			
S. Military Scheduled			
T. Other Military			
U. Executive Transport			
V. Total Hours Last 12 months			
W. Total Hours Last 3 years			

7. Airplane Make and Model	Weight Class		Total Hours To Date		
	Under 12,500 Pounds	Over 12,500 Pounds	Pilot-in-Command	Co-Pilot	Flight Engineer

United States
Office of Personnel Management

OPM Form 1170/21 (10-79)
(Formerly CSC Form 671)