

PILOT QUALIFICATIONS RECORD, FAR 135.243

Pilot Name: _____
First
Middle
Last

Address: _____

SS#: _____--____--_____ D of B: _____ Telephone: ____-____-_____

Medical: Class 1 Class 2 Issue Date: _____

Certificates	Issue Date	Certificate Number
Airline Transport Pilot		
Commercial Pilot		
Flight Instructor		

Ratings: Airplane S.E. Land M.E. Sea
 Helicopter S.E. Sea _____
 Instrument M.E. Land _____

Instrument Ratings: None Helicopter Airplane

Instructor Ratings: None Airplane S.E. Airplane M.E.
 Helicopter Glider Instr. Airplane
 Instr. Helicopter Ground Instructor _____

Flight Time	All Aircraft	All Helicopter	Airplane S.E.	Airplane M.E.	Night	IMC Actual	IFR Simulated	Cross Country
Total Time								
PIC								
SIC								
Instructor								
Turboprop								
Jet								
PC-12								

Above info is current AS OF TODAY: _____ Date _____ Pilot Signature