

Pilot Record

Name

Address Phone

Email

City State Zip Code

Birth Date SSN

FAA Pilot Certificate Number

Occupation Employer

Marital Status No. of Dependents

FAA Medical Certificate FAA Medical Basic Med Sport

Medical Date and Class Last Online Medical Course Date

Waivers (If none, write none)

Training and Recurrent Training

Date of last Biennial Flight Review or equivalent:

Date of last Instrument Competency Check:

Do you participate in FAA Pilot Proficiency Awards Program? If "Yes," what phase have you completed?

Recurrent/Transition Courses:
Describe and give dates of last courses attended

School or Instructor Do you hold a current FSI Pro Card or Simuflite Card? If yes, provide date

Pilot-In-Command Experience

Total Combined Flight Hours All Aircraft:

	Total Hours	Total Last 12 Months	Total Last 90 Days
Aircraft Make/Model			

Please explain fully any "Yes" answers to the following questions to the right.

As pilot-in-command or as co-pilot have you had or been involved in any aircraft incidents or accidents?

As pilot-in-command or as co-pilot have you been found guilty of any Federal Air Regulation violations?

Has your automobile drivers license ever been suspended or revoked?

Have you ever been arrested for operating an automobile under the influence of alcohol or drugs?

Have you had any automobile accidents within the last five years?

I represent that the answers given are true and complete to the best of my knowledge and belief and that no material information has been withheld.

Date

Signed By (Pilot's Personal Signature Required)

When completed, please email this form to contact@hoxton.com or fax to (304)876-3530.

FAA Pilot Certificates Now Held and Year Obtained

Student

Private

Commercial

ATP

CFI

CFII

FAA Pilot Ratings Now Held and Year Obtained

ASEL

AMEL

ASES

AMES

Instrument

Rotorcraft