

167th Airlift Squadron Non-Rated Pilot Application

Please read Application Workbook before submitting application.

PURPOSE: The information is requested to screen applicants for minimal qualifications for appointment in the Air National Guard. Disclosure is voluntary, but missing or incomplete responses may affect consideration. Legibility counts.

Name: Nickname/ Desired Callsign:

Present Address:

Phone: Email Address:

Date of Birth / Age: Height: Weight:

High School Name:

Address:

Year Graduated:

College(s) Name:

Address:

Year Graduated: Degree: GPA:

School Awards, Association Memberships, Extra-Curricular Activities, ROTC:

Testing:

AFOQT Scores: Pilot: Nav Verbal Quantitative Academic

PCSM Score:

Social Media Links? (LinkedIn, Facebook, Twitter, Others)

Military Service (Unit, State, Career Field)

Aviation Experience:

Total time: Ratings:

Instrument time:

Aircraft Flown:

Additional Info:

Current Employer:

Position:

Supervisor Contact Info:

Previous Employer:

Position:

Supervisor Contact Info:

FAA Medical Class/Exp Date: Military Medical Screening Completed?

Have you ever been unconscious? Explain briefly.

Have you ever had any Medical Emergencies? Explain briefly.

Is your vision correctable to 20/20?

Have you had Laser vision correction surgery?

Have any other medical condition you'd like to disclose?

Are you a Contentious Objector?

If selected, are you free to attend 2 years of training without employer problems?

If selected, are you able to attend 2 years of training and balance present family commitments?

Are you willing and able to wait as much as 2 years to begin training?

Have you interviewed at other Air National Guard or Air Force Reserve Units?

Where?

Have you accepted a Primary or Secondary Conditional Offer from another Unit?

Where?

In connection with my Application for Appointment in the West Virginia Air National Guard, I certify that the proceeding is a true and correct statement of eligibility. I understand that any information purposely left out of my application may render me ineligible for a commission with the West Virginia Air National Guard.

(Printed Full Name)

(Date)

(Signature)

