

**SPECIALTY QUALIFICATION TRAINING RECORD (SQTR)**

**Mission Observer**

NAME (Last, First, MI)	CAPID	DATE ISSUED
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**Prerequisites**

Item	Date Completed
Qualified Mission Scanner	
At least 18 years of age	

The above listed member has completed the required prerequisite training for the mission observer specialty.

\_\_\_\_\_  
UNIT/WING/REGION COMMANDER OR  
AUTHORIZED DESIGNEE'S SIGNATURE

\_\_\_\_\_  
DATE

**Familiarization and Preparatory Training**

Task	Evaluator's CAPID and Date Completed
Complete Task O-2010 Use In-Flight Services	
Complete Task O-2013 Plot a Route on a Sectional Chart	
Complete Task O-2107 Prepare for a Trip to a Remote Mission Base	
Complete Task P-2007 Discuss Mission Observer Duties and Responsibilities	
Complete Task P-2008 Discuss the Dangers of Icing	
Complete Task P-2009 Discuss the Dangers of Reduced Visibility Conditions	
Complete Task P-2010 Discuss the Dangers of Wind and Thunderstorms	
Complete Task P-2011 Discuss the Effects of Density Altitude on Aircraft Performance	
Complete Task P-2012 Identify Controlled and Special Use Airspaces on a Sectional	

The above listed member has completed the required familiarization and preparatory training requirements for the mission observer specialty qualification and is authorized to serve in that specialty while supervised on training or actual missions.

\_\_\_\_\_  
UNIT/WING/REGION COMMANDER OR  
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\_\_\_\_\_  
DATE

**Advanced Training**

Task	Evaluator's CAPID and Date Completed
Complete Task O-2002 Operate the Aircraft Radios	
Complete Task O-2011 Operate the VOR and DME	
Complete Task O-2012 Operate the GPS	
Complete Task O-2014 Assist in ELT Searches	
Complete Task O-2109 Assist in Planning and Performing a Route Search	
Complete Task O-2110 Assist in Planning and Performing a Parallel Search	
Complete Task O-2111 Assist in Planning and Performing a Creeping Line Search	
Complete Task O-2112 Assist in Planning and Performing Point Based Searches	
Complete Basic Communications User Training	
Complete the appropriate portion of CAPT 117, <i>Emergency Services Continuing Education examinations</i>	

**Exercise Participation**

The above listed member satisfactorily participated as a mission observer trainee under my direct supervision on mission number \_\_\_\_\_.

\_\_\_\_\_  
QUALIFIED SUPERVISOR'S SIGNATURE

\_\_\_\_\_  
DATE

The above listed member satisfactorily participated as a mission observer trainee under my direct supervision on mission number \_\_\_\_\_.

\_\_\_\_\_  
QUALIFIED SUPERVISOR'S SIGNATURE

\_\_\_\_\_  
DATE

**Unit Certification and Recommendation**

The above listed member has completed the requirements for the mission observer specialty qualification and is authorized to serve in that specialty on training or actual missions.

\_\_\_\_\_  
UNIT/WING/REGION COMMANDER OR  
AUTHORIZED DESIGNEE'S SIGNATURE

\_\_\_\_\_  
DATE