

## UNIT SAFETY OFFICER INFORMATION

Unit Name and Charter # \_\_\_\_\_

Is a Corporate Aircraft normally assigned to this unit? \_\_\_\_\_

Safety Officer's Name \_\_\_\_\_ Rank \_\_\_\_\_

Home Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Other Phone \_\_\_\_\_ CAP Radio Call \_\_\_\_\_

Are you a Certified Pilot? Yes No

If Yes, what is the highest Certificate you hold?

Student Recreational Private Commercial ATP

Are you an FAA designated Accident Prevention Counselor? Yes No

Do you have 500 or more Pilot-in-Command Flight hours? Yes No

Completed the ECI/CAP Safety Officer's Course? Yes No

Asst. Safety Officer's Name \_\_\_\_\_ Rank \_\_\_\_\_

Home Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Other Phone \_\_\_\_\_ CAP Radio Call \_\_\_\_\_

Are you a Certificated Pilot? Yes No

If Yes, what is the highest Certificate you hold?

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Completed the ECI/CAP Safety Officer's Course? Yes No

Unit Commander's Signature \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_

Safety Officer's Signature \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_