

FLIGHT INSTRUCTOR QUESTIONNAIRE

Candidate Name _____

Attach Resume _____

Are You a United States Citizen _____

FAA Medical Class _____ Expiration Date _____

Flight Training

Rating	School	Campus Location	141/61	Completion Date	Knowledge Test Grade	Flight Test Date	Flight Test Number of Attempts
Private Pilot							
Instrument Rating							
Commercial Pilot							
CFI							
CFII							
MEI							
ATP							

Aircraft Flown and Hours

Aircraft	Model	Analog/G1000	Hours

Please Note: Ocean Aviation requests permission to review Pilots Record Database. Approved by (signature) _____ Date _____

Mandatory Preemployment and Mandatory Random Drug Testing required