

**US ARMY FLIGHT SURGEON PRIMARY COURSE  
(6A-61N9D)  
PRE-EXECUTION CHECKLIST**

| TYPE OR PRINT                            |                  |   |
|--|------------------|---|
| NAME:                                    |                  | SSN:  |
| RANK:                                    |                  | DATE OF RANK:   |
| UNIT:                                    |                  | REPORT DATE:  |
| 1 <sup>ST</sup> LINE SUPERVISOR INITIALS | STUDENT INITIALS | PART I: UNIT PREPARATION OF THE STUDENT<br>(THIS CHECKLIST AND ATTACHMENTS MUST BE TURNED IN UPON REPORTING TO THE COURSE)  |
|  |                  | Student has a current Stamped Qualified Flight Physical (copy to accompany student to course) Not required for Aviation Clinic NCO Course   |
|  |                  | Student has a current/valid military CAC ID card that remains valid throughout the course length (2 weeks from the report date)   |
|  |                  | Student has 1 pair of identification tags issued  |
|  |                  | Travel Orders (PCS, TDY enroute) <b>or</b> DD Form 1610 (TDY and return) (10 copies)  |
|  |                  | Verification of Security Clearance from unit  |
|  |                  | HIPAA Training certificate (current last 12 months)   |
|  |                  | Medical Student Evaluation Form (if applicable)   |
|  |                  | Student has a Government Credit Card/Travel Advance that will preclude financial hardship while attending the course ( <b>Lodging, meals, and rental car must be included in the fund citation, course is NOT MTSS funded</b> ).<br><b>Lodging, meals, transportation not provided.</b> |
|  |                  | Student has a current SGLV Election Form ( <b>Photocopy attached to this checklist</b> )  |
|  |                  | Student has a current DD Form 93 Record of Emergency Data current ORB ( <b>Photocopy attached to this checklist</b> )   |
|  |                  | If applicable, student is in receipt of flight information that covers transportation to and from the course  |
|  |                  | If applicable, student has a current POV Inspection Checklist completed within two weeks of report date to the course (If needed POV Inspection Checklist is posted on the website) ( <b>Photocopy attached to this checklist</b> )   |
|  |                  | If applicable, student has 1 set of prescription eyeglasses (contact lenses will not be worn during the course)   |
|  |                  | Student is in receipt of school/course information (Website Welcome Letter)   |
|  |                  | Student has all required clothing/equipment IAW Course Packing List (Website Welcome Letter)  |
|  |                  | DA Form 31 to carry you through the entire course / If taking leave, leave needs to be included on the same DA Form 31. Student has service-specific leave for arrival and departure of the course if needed  |
|  |                  |   |

| UNIT POINTS OF CONTACT           |       |         |
|----------------------------------|-------|---------|
| Commander:                       | Cell: | Office: |
| First Sergeant:                  | Cell: | Office: |
| 1 <sup>st</sup> Line Supervisor: | Cell: | Office: |
| Unit Fax:                        |       |         |
| First Sergeant Email:            |       |         |

| CERTIFICATION OF COMPLETION |  |
|-----------------------------|--|
| Student Signature:          |  |
| Commander/1SG Signature:    |  |