#  QE REQUEST FORM

Date Rec’d

May be sent via e-mail, USPS or fax

From: FC/FSO-MT or SO-MT:

 Email: Phone:

To: AQEC

**Candidate’s Name Empid Flotilla**

 **Use separate form for each member**

**PRIMARY MENTOR :** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am requesting a QE for the following purpose:

INITIAL CERTIFICATION CURRENCY MAINTENANCE

Crew Checkride [ ]  Three-year Crew [ ]

Coxswain Checkride [ ]  Three-year Coxswain [ ]

PWO Checkride [ ]  Three-year PWO [ ]

Nav Rules 70 Exam [ ]

Request date: (Not sooner than 14 days) Date Time

Alternate date: (Not sooner than 21 days) Date Time

Location:

Facility 1: Facility 2:

 Facility Name & Facility Registration/Documentation # Facility Name & Facility Registration/Documentation #

**The candidate has been trained to the standards set forth in the appropriate publication(s) and is ready**

 **to perform the required tasks before a QE**

[ ]  I have inspected the candidate’s Boat Crew Qualification Guide (Part 1, 2 or 3, 4 as appropriate) and paperwork

[ ]  The *Record of Completed Tasks* -Chapter 1 is complete; a mentor has initialed/dated each appropriate task

[ ]  The candidate is BQ/AX as verified in AUXDATA

Initial

Qualification

* **All items shown on the Crew/Coxswain/PWO Checklist are attached**

**[ ]  The AUXDATA Individual Member Training Record Report is attached**

**[ ]  The AUXDATA Individual Training Status Report (Coxswain only) is attached**

**[ ]  The Operations Policy Exam completion letter (Coxswain /PWO) is attached**

Member must have completed and bring forms to Currency Maintenance Evaluation

* Appendix E - Third Year Currency Maintenance (ABQH 16794.52B) Signed by FSO/SO-IS

3RD Year

 CM

* Enclosure 1or 2 as appropriate (ABQH 16794.52B)

 Signed: FC/FSO-MT or SO-MT Date

Date Replied: QE Assigned:

 QE Assigned:

 Tel: E-mail:

 Tel: E-mail:

REV 4/29/23

Previous editions are obsolete