

QUALIFICATION AND RE-CERTIFICATION

Select Qualification or Re-Qualification: Basic, Instructor, Vessel Examiner, Program Visitor

Member ID: _____ **Member Name:** _____

I have completed one of the following courses required to receive a Basic Qualification (BQ) status (attach certificate):

- | | | |
|------------------------------------|--------------------------------|----------------------------|
| Basic Skills and Seamanship (BS&S) | Sailing Fundamentals (SF) | Boat Smart Course |
| Boating Safety Course | America's Boating Course (ABC) | USPS Public Boating Course |
| | or About Boating Safety (ABS) | |

Member Signature: _____

**** INSTRUCTOR (IT) – For INITIAL QUALIFICATION use ANSC Form 7014, not this form.****

INSTRUCTOR (IT) RE-CERTIFICATION (Requires activity in past 5 years): Teach 2 hours or Assist for 4 hours.

I certify that the above named member has completed the following under my supervision:

Instructor ID	Instructor Name (Print)	Instructor Signature	IT Date	Assist Date	Hours.
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

VESSEL EXAMINER (VE) – INITIAL QUALIFICATION - Exam Score = _____% (Attach Answer Sheet)

I certify that the above named member has completed the following VSC's under my supervision.

(Total five (5) VSC's to be completed with a Certified VE)

VE ID	VE Name (Print)	VE Signature	VSC Date	Registration/ Documentation No.
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

VESSEL EXAMINER (VE) – RE-CERTIFICATION (Requires VE activity in past 5 years)

I certify that the above named member has completed the following VSC's under my supervision

(Total two (2) VSC's to be completed with a Certified VE)

VE ID	VE Name (Print)	VE Signature	VSC Date	Registration/ Documentation No.
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

PROGRAM VISITOR (PV) – INITIAL QUALIFICATION - Exam Score = _____% (Attach Answer Sheet)

I certify that the above named member has completed the following PV's under my supervision

(Total two (2) PV's to be completed with a Certified PV)

PV ID	PV Name (Print)	PV Signature	PV Date	Location
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

PROGRAM VISITOR (PV) – RE-CERTIFICATION (Required PV activity in past 5 years.)

I certify that the above named member has completed the following PV's under my supervision

(Total one (1) PV's to be completed with a Certified PV)

PV ID	PV Name (Print)	PV Signature	PV Date	Location
_____	_____	_____	_____	_____

FC Member ID: _____ **FC Name:** _____

I have reviewed the pertinent documents and attest that the member named above has successfully completed all requirements for qualification/re-certification as shown above. **Attach exam answer sheets where applicable.**

Signature of Flotilla Commander: _____ **Date:** _____

INSTRUCTIONS FOR COMPLETING FORM MT-2 QUALIFICATIONS AND RE-CERTIFICATIONS

This form may be completed on the computer, but requires original signatures. Print it out and mail it to the DIRAUX office for certification and entering into AUXDATA.

BOATING COURSE

- Member who has completed an Auxiliary or United States Power Squadron boating safety course should complete the top section of the form.
- Member number and print name. Check the course completed, attach the certificate and sign the form in the top block.

INSTRUCTOR PROGRAM (IT)

- For initial instructor qualification, use ANSC Form 7014 **ONLY**, not this form.

INSTRUCTOR RE-CERTIFICATION (IT) *Requires some activity in the past 5 years*

- The member qualifying completes the top block with Member ID Number, print name and signature.
- A certified instructor must complete the Instructor (IT) Re-certification information.

VESSEL EXAMINER (VE) INITIAL QUALIFICATION

- The member qualifying completes the top block with Member ID Number, print name and signature.
- The Exam Score should be entered and if it was a written test attach the answer sheet. If test was taken on-line, so indicate.
- The certified vessel examiner(s) should complete the five exams give under their supervision.

VESSEL EXAMINER (VE) RE-CERTIFICATION *Requires VE activity in the past 5 years*

- The member qualifying completes the top block with Member ID Number, print name and signature.
- The certified vessel examiner(s) should complete the two exams given under their supervision.

PROGRAM VISITOR (PV) INITIAL QUALIFICATION

- The member qualifying completes the top block with Member ID number, print name and signature.
- The Exam Score should be entered and if it was a written test attach the answer sheet. If test was taken on-line, so indicate.
- The certified program visitor(s) should complete the tow visits performed under their supervision.

PROGRAM VISITOR (PV) RE-CERTIFICATION

- The member qualifying completes the top block with member ID Number, print name and signature.
- The certified program visitor should complete the required visit information of the visit performed.

The bottom section of the form is to be completed by the Flotilla Commander and sent to the DIRAUX Office for certification of the member and entry into AUXDATA prior to the member being able to perform subsequent missions.

**Mail to: Commander (oax)
14th Coast Guard District
300 Ala Moana Blvd, Rm 9-207
Honolulu HI 96850-4982**