

DCA21FA174

OPERATIONAL FACTORS/HUMAN PERFORMANCE

Attachment 5

Flight Crew Training Records [Excerpts]

May 4, 2022

15.1.7.2

Form ATM-007

Rhoades Aviation, Inc.

Pilot Proficiency Check

Form	Rev.	Date
ATM-007	16	11/15/2020

Employee No.	Pilot's Name (Last, First, M.I.) OKAI, HENRY L.		☒ PIC ☐ SIC	Base Month Jun
Sim. / AC Number 539	Airman Certificate Number [REDACTED]	Medical Certificate Class 155 Date 02/04/21	Time Logged 2+10	Date of Check 6/9/21
Type of Check (check all that apply) ☐ Initial ☒ Recurrent ☐ Requalification (No waived items) ☐ ATP / Aircraft Type Rating		Type of Training (check one) ☐ Recent Experience § 121.439(b) ☐ Consolidation Refresher Training § 121.434(h)(4)(ii)		
☐ I certify the TRAINING for the above-named pilot is complete. Instructor _____ Date _____ Emp. # _____				
w = May be waived (except for PIC upgrade) ♦ = Recent experience		1	AT	2
Company Check Pilot Equipment examination		S		
FAA oral exam - Name _____ (Signature) _____ Certificate # _____ Date _____		NA		
Preflight inspection (interior and exterior visual inspection) 6/14/21 OK		S		
Starting / pre-takeoff checks / powerplant checks		S		
Use of airport diagram (Surface Movement Chart)		S		
Obtains clearance before crossing or entering active runways		S		
Taxiing (PIC PC & Type Rating only)		S		
Observation of all SMGCS markings and lighting		S		
Flight management system (FMS) entry, if appropriate, for departure runway prior to crossing hold-short line for takeoff		NA		
Receipt of takeoff clearance and confirmation of aircraft location		S		
Takeoffs	Normal	S		
	Instrument / lower than standard minimums	S		
	Crosswind (with gusts if practical)	S		
	With engine failure after V1 before V2	♦	S	
	Rejected	W	S	
Area departure or arrival (one may be waived)		S		
Holding		W	W	
Steep turns (PIC PC & type rating only)		A,W	W	
Unusual attitude recovery		A	NA	
Approach to stall 3x (2 can be waived, 1 must be a turn) ☒ Takeoff ☒ Landing ☒ Clean		W	S	
ILS approaches	Normal (autopilot can be on)	♦	S	
	Engine inoperative (hand flown from FAF)		S	
Three takeoffs & landings per §121.439(b) ☒ Complete ☐ Incomplete		♦	S	
Remarks				
I certify the CHECK indicated for the above-named individual is: (ATM-010 filed if Unsatisfactory) [14 CFR 121.401(c)]		☒ Satisfactory ☐ Unsatisfactory		
Check Pilot or FAA Name (Print) Emp.# or 110A #		Check Pilot or FAA Signature		
Check Pilot Performance ☐ Satisfactory ☐ Unsatisfactory		FAA 110A # FAA Observer Name (Print) / Signature / District Office		
Grading: S = Satisfactory Performance U = Unsatisfactory Performance W = Waived NA = Not Applicable				
Enter the pilot's performance ("S" or "U") during their first attempt in the column labeled "1". If they receive a "U" and additional training is provided, put a check mark in the column labeled "AT" and enter the pilot's performance ("S" or "U") during their second attempt in the column labeled "2".				

(ATM)

Revision: 15
Date: 10/10/2019

15.1.9.2

Form ATM-008

Rhoades Aviation, Inc.

Line Check Report

Form	Rev.	Date
ATM-008	15	09/10/2019

RAI		LINE CHECK [14 CFR 121.440]				A/C Type B737																		
Employee No. [REDACTED]		Airman's Name (Last, First, M.I.) OKAL, HENRY L.				Base Month Dec																		
Sim / AC Number N306AL		Airman Certificate Number [REDACTED]		Medical Certificate Class 1st Date 6/24/20		Date of Check 12/24/20																		
Type of Check																								
☐ Initial ☐ Requalification ☒ Recurrent ☐ Other (specify) _____ ☐ Transition ☐ Probationary ☐ Consolidation																								
Date	Flight #	A/C #	From	To	Blk Time	Approach (check one)																		
12/24/20	306	N306AL	KAL	ITO	1.0	☒ PF ☒ PM ☐ Visual	☒ Precision ☐ Non Precision (Specify Type)																	
12/24/20	306	N306AL	ITO	HL	.8	☒ PF ☒ PM ☐ Visual	☒ Precision ☐ Non Precision (Specify Type)																	
<table border="1"> <tr> <td rowspan="4" style="writing-mode: vertical-rl; transform: rotate(180deg);">Other Crewmembers</td> <td>Emp. #</td> <td>Name</td> <td>Position</td> <td>☒ Airman & Medical Certificate Checked</td> </tr> <tr> <td>Emp. #</td> <td>Name</td> <td>Position</td> <td>☐ Airman & Medical Certificate Checked</td> </tr> <tr> <td>Emp. #</td> <td>Name</td> <td>Position</td> <td>☐ Airman & Medical Certificate Checked</td> </tr> <tr> <td>Emp. #</td> <td>Name</td> <td>Position</td> <td>☐ Airman & Medical Certificate Checked</td> </tr> </table>								Other Crewmembers	Emp. #	Name	Position	☒ Airman & Medical Certificate Checked	Emp. #	Name	Position	☐ Airman & Medical Certificate Checked	Emp. #	Name	Position	☐ Airman & Medical Certificate Checked	Emp. #	Name	Position	☐ Airman & Medical Certificate Checked
Other Crewmembers	Emp. #	Name	Position	☒ Airman & Medical Certificate Checked																				
	Emp. #	Name	Position	☐ Airman & Medical Certificate Checked																				
	Emp. #	Name	Position	☐ Airman & Medical Certificate Checked																				
	Emp. #	Name	Position	☐ Airman & Medical Certificate Checked																				
Conditions: ☐ VMC ☒ IMC ☐ Day ☒ Night ☐ Icing ☐ Thunderstorms ☐ Windshear																								
S	U	Performance Grade: S = Satisfactory U = Unsatisfactory			S	U																		
☒		1. Flight planning (weather analysis, flight release, fuel requirements)			☒		11. Fuel conservation																	
☒		2. Preflight			☒		12. Personal appearance / uniform																	
☒		3. Exterior inspection			☒		13. Systems management																	
☒		4. Engine start			☒		14. Compliance with aircraft limitations																	
☒		5. Taxi			☒		15. Crew resource management																	
☒		6. Takeoff & climb			☒		16. Non-normal / emergency procedures																	
☒		7. Enroute			☒		17. Adherence to SOPA / SMAC																	
☒		8. Descent			☒		18. Emergency equipment																	
☒		9. Approach & landing			☒		19. Pilot flying duties																	
☒		10. Flight equipment & manuals			☒		20. Pilot monitoring duties																	
Remarks																								
I certify the Line Check indicated for the above named individual is: ☒ Satisfactory ☐ Unsatisfactory (ATM-010 filed if Unsatisfactory) [14 CFR 121.401(c)]																								
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]																		
Check Pilot or FAA Name (Print)		Emp. # or 110A #		Check Pilot or FAA Signature		Pilot Signature																		
☐ Satisfactory ☐ Unsatisfactory		FAA 110A #		FAA Observer Name (Print) / Signature / District Office																				

(ATM)

Revision: 16
Date: 11/15/2020

15.1.21.2

Form ATM-019

Rhoades Aviation, Inc.

Recurrent Pilot Training Record

Form	Rev.	Date
ATM-019	16	11/15/2020

Name <u>Henry Okai</u>	Employee number <u>[REDACTED]</u>
Training Type ☒ Recurrent captain ☐ Recurrent first officer	

Phase 1 – Recurrent ground training to be completed and signed by the certifying instructors

Code	Segment	Date Completed	Hours	Inst. Emp. #	Certifying Instructor's Signature
ACS	Air Carrier Specific	05/07/2021	2	[REDACTED]	[REDACTED]
EMER	Emergency training	05/04/2021	3	[REDACTED]	[REDACTED]
HAZ	*Hazardous materials	05/03/2021 (equal)	2	[REDACTED]	[REDACTED]
SEC	Security Training	05/04/2021 (equal)	2	[REDACTED]	[REDACTED]
CRM	Crew Resource Mgmt	05/07/2021	2	[REDACTED]	[REDACTED]
FTGE	Fatigue Education	05/07/2021	2	[REDACTED]	[REDACTED]
AGT	Aircraft ground training	see attached sheet	27.0		

* Due every 24 months.

Phase 2 – Recurrent simulator/aircraft training (to be completed and signed by the instructor)

Code	Segment	A/C type	Pos	Date Completed	Hours	Inst. Emp #	Sim or A/C ID #	Instructor Signature
AFT	Flight Training / PC Prep	B737	CA	6/2/21	4100	[REDACTED]	539	[REDACTED]
WFT	**Windshear	B737	CA	6/1/21	.3	[REDACTED]	539	[REDACTED]
EET	*Extended Envelope	B737	CA	6/8/21	4100	[REDACTED]	592	[REDACTED]
PC	Prof check	B737	CA	6/9/21	2110	[REDACTED]	539	[REDACTED]
LOFT	LOFT				4			

* Due every 24 months.

**Due every 12 months.

Note: If the Chief Pilot or Flight Standards determines that a portion of the check is required to occur in the aircraft, he or she will provide instructions on how to perform the check and how to document completion of the checking event.

Certification

An instructor's signature at each location certifies that the stated ground training was completed as outlined in the RAI FAA-approved Aircrew Training Manual and that the candidate's knowledge and proficiency is determined to be satisfactory. A validating signature signified that the satisfactory completion of requirements is certified on this and accompanying forms. All completed forms are attached. [14 CFR 121.401(c), 14 CFR 121.415(a)(1)]

Flight crew status board updated by [REDACTED] on 06/21/2021

Rhoades Aviation, Inc.

Recurrent Pilot Training Record

Form	Rev.	Date
ATM-019	16	11/15/2020

Recurrent Ground Training Record – Year 3

DAY	HRS	MODULE	MODULE TITLE	DATE	INIT	Instructor(s) Signature
Day 1	8.0	ACS	Duties and Responsibilities	05/04/2021		
		38	Crewmember Duties and Responsibilities	05/04/2021		
		38	Forms	05/04/2021		
		ACS	Contents of Certificate and Ops Specs	05/04/2021		
		38	Operations Specifications	05/04/2021		
		38	Federal Aviation Regulations	05/05/2021		
		ACS	Company Operations Manual	05/05/2021		
		38	General	05/05/2021		
		38	Operations Policies	05/05/2021		
		38	Operations Procedures	05/05/2021		
		38	Aircraft Maintenance	05/06/2021		
		38	Emergency Procedures	05/06/2021		
		ACS	Enroute & Term. Area Charting & Flt. Planning	05/06/2021		
		38	Flight Release Procedures	05/06/2021		
		ACS	Air Carrier Specific Training Review & Test	05/07/2021		
		38	Runway Incursions	05/07/2021		
		38	Weight and Balance (day 1)	05/07/2021		
Day 2	8.0	38	Weight and Balance (day 2)	05/07/2021		
		38	Wt. and Bal. / Performance Computations	05/07/2021		
		38	Navigation / Instrument Approaches	05/07/2021		
		38	Air Traffic Control (ATC)	05/07/2021		
		38	Meteorology	05/07/2021		
		38	Communication Procedures	05/07/2021		
		38	Warning Systems	05/07/2021		
		FTGE	Fatigue Education & Awareness	05/07/2021		
Day 3	8.0	EMER	Flight Crewmember General Emergency	05/04/2021		
		CRM	Flight Crewmember CRM	05/07/2021		
		SEC	Flight Crewmember Security (Required)	05/04/2021		
		39	Boeing 737-200 Lighting	.		
Day 4	8.0	39	Boeing 737-200 Fire Protection	.		See attached sheet
		39	Boeing 737-200 Pneumatics	.		
		39	Boeing 737-200 Air Conditioning & Press.	.		
		39	Boeing 737-200 Heating and Ventilation	.		
		39	Boeing 737-200 Oxygen	.		
		39	Boeing 737-200 Limitations	.		
Day 5	*8.0	39	Boeing 737-200 Landing Gear and Brakes	.		
		39	Boeing 737-200 Navigation	.		
		39	Boeing 737-200 GPS	.		
		39	B737-200 Aircraft Specific Review & Test	.		
		41	Extended Envelope Training	05/03/2021		
		HAZ	Hazardous Materials (Every 24 months) *(6.0 hrs without 2.0 hrs Hazmat training)	05/04/2021		

(ATM)

Revision: 16
Date: 11/15/2020

15.1.21.2

Form ATM-019

COPY

Rhoades Aviation, Inc.

Recurrent Pilot Training Record

Form	Rev.	Date
ATM-019	16	11/15/2020

Name <u>Henry Okai</u>	Employee number <u>[REDACTED]</u>
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Training Type

☒ Recurrent captain ☐ Recurrent first officer

Phase 1 – Recurrent ground training to be completed and signed by the certifying instructors

Code	Segment	Date Completed	Hours	Inst. Emp. #	Certifying Instructor's Signature
ACS	Air Carrier Specific		2		
EMER	Emergency training	<u>05/04/2021</u>	3	<u>[REDACTED]</u>	<u>[REDACTED]</u>
HAZ	*Hazardous materials	<u>05/03/2021 (equal)</u>	2	<u>[REDACTED]</u>	<u>[REDACTED]</u>
SEC	Security Training	<u>05/04/2021 (equal)</u>	2	<u>[REDACTED]</u>	<u>[REDACTED]</u>
CRM	Crew Resource Mgmt		2		
FTGE	Fatigue Education		2		
AGT	Aircraft ground training	<u>05/26/2021</u>	27.0	<u>[REDACTED]</u>	<u>[REDACTED]</u>

* Due every 24 months.

Phase 2 – Recurrent simulator/aircraft training (to be completed and signed by the instructor)

Code	Segment	A/C type	Pos	Date Completed	Hours	Inst. Emp #	Sim or A/C ID #	Instructor Signature
AFT	Flight Training / PC Prep							
WFT	**Windshear							
EET	*Extended Envelope							
PC	Prof check							
LOFT	LOFT				4			

* Due every 24 months. **Due every 12 months.

Note: If the Chief Pilot or Flight Standards determines that a portion of the check is required to occur in the aircraft, he or she will provide instructions on how to perform the check and how to document completion of the checking event.

Certification

An instructor's signature at each location certifies that the stated ground training was completed as outlined in the RAI FAA-approved Aircrew Training Manual and that the candidate's knowledge and proficiency is determined to be satisfactory. A validating signature signified that the satisfactory completion of requirements is certified on this and accompanying forms. All completed forms are attached. [14 CFR 121.401(c), 14 CFR 121.415(a)(1)]

Flight crew status board updated by _____ on _____

Rhoades Aviation, Inc.

Recurrent Pilot Training Record

Form	Rev	Date
ATM-019	16	11/15/2020

Recurrent Ground Training Record – Year 3

DAY	HRS	MODULE	MODULE TITLE	DATE	INIT	Instructor(s) Signature
Day 1	8.0	ACS	Duties and Responsibilities			
		38	Crewmember Duties and Responsibilities			
		38	Forms			
		ACS	Contents of Certificate and Ops Specs			
		38	Operations Specifications			
		38	Federal Aviation Regulations			
		ACS	Company Operations Manual			
		38	General			
		38	Operations Policies			
		38	Operations Procedures			
		38	Aircraft Maintenance			
		38	Emergency Procedures			
		ACS	Enroute & Term. Area Charting & Flt. Planning			
		38	Flight Release Procedures			
		ACS	Air Carrier Specific Training Review & Test			
		38	Runway Incursions			
		38	Weight and Balance (day 1)			
Day 2	8.0	38	Weight and Balance (day 2)			
		38	Wt. and Bal. / Performance Computations			
		38	Navigation / Instrument Approaches			
		38	Air Traffic Control (ATC)			
		38	Meteorology			
		38	Communication Procedures			
		38	Warning Systems			
Day 3	8.0	FTGE	Fatigue Education & Awareness			
		EMER	Flight Crewmember General Emergency <i>and Briefs</i>	05/04/2021		
		CRM	Flight Crewmember CRM			
		SEC	Flight Crewmember Security <i>(Repeat)</i>	05/04/2021		
Day 4	8.0	39	Boeing 737-200 Lighting	05-25-2021		
		39	Boeing 737-200 Fire Protection	05-25-2021		
		39	Boeing 737-200 Pneumatics	05-25-2021		
		39	Boeing 737-200 Air Conditioning & Press.	05-25-2021		
		39	Boeing 737-200 Heating and Ventilation	05-26-2021		
		39	Boeing 737-200 Oxygen	05-26-2021		
Day 5	*8.0	39	Boeing 737-200 Limitations	05-26-2021		
		39	Boeing 737-200 Landing Gear and Brakes	05-26-2021		
		39	Boeing 737-200 Navigation	05-26-2021		
		39	Boeing 737-200 GPS	05-26-2021		
		39	B737-200 Aircraft Specific Review & Test	05-26-2021		
		41	Extended Envelope Training	05/03/2021		
		HAZ	Hazardous Materials (Every 24 months) *(6.0 hrs without 2.0 hrs Hazmat training)	05/02/2021		

(ATM)

Revision: 16
Date: 11/15/2020

Rhoades Aviation, Inc.

Recurrent Pilot Training Record

Form	Rev.	Date
ATM-019	16	11/15/2020

FFS Recurrent Training

Grading Guide:

All completed items must be graded.

S Maneuver or Procedure performed to current FAA-S-ACS-11 standards.

U Maneuver or Procedure performed outside of tolerance, additional training required.

I Maneuver or Procedure Incomplete.

SIMULATOR SESSION				RECURRENT TRAINING
1	2	3	4	Flight Training or PC Preparation <i>If flight training, all are required (unless noted otherwise) per §121.409(b)(2)(i)</i> <i>If PC preparation, all are optional.</i>
S	S			Visual inspection exterior and interior
S	S			Prestart and starting procedures
S				Taxiing (<i>not required for SIC</i>)
S	S			Pretakeoff procedures
S	S			Normal takeoff
S	S			Instrument takeoff
S	S	S		Crosswind takeoff with gusts ¹
	S			V1 cut
	S			Rejected takeoff (<i>waivable under §121.441(d)</i>)
S				Steep turns
S	S			Stall prevention in takeoff configuration
S				Stall prevention in cruise or landing configuration
S	S			Approach and landing flaps with 10
S	S			Area departure (SID)
S				Holding (<i>waivable under §121.441(d)</i>)
S	S			ILS Approach
	S			Single engine ILS hand flown inside FAF
S	S			Non-precision approach
S				Second non-precision approach (<i>must be different type</i>)
	S			Missed approach from ILS (<i>published missed approach</i>)
	S			Additional missed approach
S	S			Normal landing
S	S			Landing from ILS approach
	S	S		Crosswind landing with gusts ¹
	S			Single engine landing
S	S			Rejected landing (<i>from 50' above runway</i>)
				Normal, abnormal, and emergency procedures as necessary for check pilot to determine adequate knowledge of and ability to perform such procedures. List trained procedures below:
1	2	3	4	Extended Envelope Training <i>All are required per §121.423(b)</i>
		S		Manually controlled slow flight
		S		Manually controlled loss of reliable airspeed
		S		Manually controlled instrument departure and arrival
		S		Upset recovery maneuvers
		S		Recovery from bounced landing
		S		Instructor-guided, hands-on experience of recovery from full stall and, if equipped, stick pusher activation
		S		Crosswind takeoffs with gusts (<i>emphasize</i>)
		S		Crosswind landings with gusts (<i>emphasize</i>)
1	2	3	4	Windshear Training <i>All are required per §121.427(e)(1)(ii) and §121.409(d)</i>
S				Windshear on takeoff
	S			Windshear on landing

15.1.6.2

Form ATM-006

Rhoades Aviation, Inc.

Pilot Simulator Training Record

Form	Rev.	Date
ATM-006	Orig.	05/01/2013

TYPE OF TRAINING			
☒ CAPTAIN	INITIAL	LEVEL A	
☐ FIRST OFFICER	TRANSITION	LEVEL B (i)	
☐	UPGRADE	☒ LEVEL C (ii)	
☐	☒ RECURRENT	LEVEL D (iii)	
☐ SLIDE TRAINING	REQUAL	☒ APPENDIX H	
☐ RAFT TRAINING	FAA ORAL	A/C REQUIRED	
☐	FAA CERT	CIRCLING	

FIXED BASE SIMULATOR/CPT							
PER	LSN	DATE	SIM	PILOT	ACC	OBS	INIT
1							
2							
3							
4							
5							
6							
7							
8							

FULL FLIGHT SIMULATOR							
PER	LSN	DATE	SIM	PILOT	ACC	OBS	INIT
1	1	6/7/21	889	2100	2100		
2	2	6/9/21	592	4100	6100		
3							
4							
5							
6							
7							
8							
9							
10							

	DATE	PILOT	ACC	OBS	Emp. #
PRE-CHECK	6/8/21	2100	2100	-	
PROFICIENCY CHECK					
LOFT					
NORMAL	-	-	-	-	-
NON-NORMAL					

Distribution: DO, CP, Crewmember Training Folder
FORM ATM-006 Rev. 05/01/2013

Chief [redacted] Audit Verification Signature and Date

Sig. [redacted]	Date 6/9/21	Sig. _____	Date _____
Sig. _____	Date _____	Sig. _____	Date _____
Sig. _____	Date _____	Sig. _____	Date _____
Sig. _____	Date _____	Sig. _____	Date _____

GROUND SCHOOL START DATE 05/03/2021	
PILOT HENRY OKAI	EMP. # [redacted]
CERT _____	SSN _____
CELL PHONE _____	
HOME PHONE _____	
PREVIOUS EXPERIENCE _____	
TOTAL TIME IN TYPE _____	TOTAL TIME _____

REQUIREMENTS			
SUBJECT	DATE	INIT	FAA
COCKPIT PROCEDURAL TRAINER			
EMER EQUIP / FIRE EQUIP			
EMER PICTORIAL			
DOOR TRAINING			
CABIN PICTORIAL			
EXTERNAL PICTORIAL			
PRE-ORAL EVALUATION			
ORAL			
FAA RATING SIMULATOR			
PROFICIENCY CHECK RECOMMENDED	6/8/21		
PROFICIENCY CHECK			

DOCUMENTATION CHECKLIST			
REQUIRED FORMS	DATE	INIT	HOURS
RAI PC (FAA 8710 IF REQ'D)			
OPERATING EXPERIENCE (OE) FORM			
RESTRICTED CREWMEMBER FORM			
LINE CHECK (OE)			
AIRMAN CERTIFICATE COPIES	6/7/21	[redacted]	
MEDICAL CERTIFICATE COPY	6/7/21	[redacted]	
GROUND SCHOOL			

Recommending Instructor Signature Required
[14 CFR 121.401(c)]

ORAL RECOMMENDATION DATE _____

SIMULATOR TEST RECOMMENDATION DATE _____

AIRCRAFT TEST RECOMMENDATION DATE _____

(ATM)

Revision: 15
Date: 10/10/2019

15.1.7.2

Form ATM-007

Pilot Proficiency Check / Recurrent Training Report
(circle one above)

Rhoades Aviation, Inc.

Form	Rev.	Date
ATM-007	15	09/10/2019

Employee No. [REDACTED]		Pilot's Name (Last, First, M.I.) Ryan, Gregory L.		☐ PIC ☒ SIC		Base Month Jun (NEW)	
Sim / AC Number 559, -		Airman Certificate Number [REDACTED]		Medical Certificate Class 2 Date 6-10-20		Time Logged 2+10	
Date of Check 6/16/20							
Type of Check (check all that apply) ☐ Initial ☒ Recurrent ☐ Requalification (No waived items) ☐ ATP / Aircraft Type Rating		Type of Training (check one) ☐ Landing Certification (Training) ☐ Landing Currency (Demonstration) ☐ Recent Experience ☐ Consolidation Refresher Training		I certify the TRAINING for the above named pilot is: ☐ Complete ☐ Incomplete Instructor _____ Emp # _____ Date _____			
w = May be waived • = One may be waived ♦ = Recent experience		Q1 Q2 Q3		A = Only req. for ATP / Aircraft Type Rating R = Reference Ops Specs for applicable aircraft		Q1 Q2 Q3	
Oral exam		S		Missed Approaches		S	
FAA oral exam (Signature) _____		NA		From an ILS		S	
TCE / APC # _____ DATE _____				Engine Inoperative		S	
Preflight inspection		S		VOR		S	
Starting / pre-takeoff checks / powerplant checks		S		LOC		S	
Use of airport diagram (Surface Movement Chart)		S		LOC Back Course		NA	
Obtains clearance before crossing or entering active runways		S		GPS		NA	
Taxiing		S		Circle		A,R NA	
Observation of all SMGCS markings and lighting		S		Normal		♦ S	
Takeoff		S		From an ILS		S	
		S		Crosswind		S	
		S		Crosswind with gust		NA	
		S		From a circle		A,R NA	
		S		Rejected		S	
Flight management system (FMS) entry, if appropriate, for departure runway prior to crossing hold-short line for takeoff		S		No flap or nonstandard flaps		A,W S	
Receipt of takeoff clearance and confirmation of aircraft location		S		Landing with engine(s) Inoperative		S	
Normal		♦ S		Normal		♦ S	
Lower than standard minimums		S		From an ILS		S	
Instrument		S		Crosswind		S	
Crosswind		S		Unusual attitude recovery		A S	
Crosswind with gusts		NA		Right seat competency (PIC only)		NA	
Takeoff with engine failure		S		Pilot Monitoring (not flying) duties		S	
Rejected takeoff		S		Non-normal / emergency procedures		S	
Area departure		• S		Adherence to SOPA		S	
Area arrival		• S		Crew resource management		S	
Holding		w S		Judgment		S	
Steep Turns (PIC only)		A,W W		Three takeoffs & landings: ☒ Complete ☐ Incomplete		♦ S	
Approach to stall (Min of 1, 1 must be in a turn)		S		Windshear Training (Approved Simulator Only)		S	
☒ Takeoff ☒ Landing ☒ Clean		S		Prior to V1		S	
ILS approaches		♦ S		After takeoff		S	
		S		Approach		S	
		S					
Automatic		♦ S					
Flight Director		S					
Lower Landing Minimums		S					
Engine Inoperative		S					
Remarks							
I certify the CHECK indicated for the above named individual is: (ATM-010, filed if Unsatisfactory) [14 CFR 121.401(c)]				☒ Satisfactory ☐ Unsatisfactory		[REDACTED]	
Check Pilot or FAA Name (Print)		Emp.# or 110A #		Check Pilot or FAA Signature		Pilot Signature	
Check Pilot Performance ☐ Satisfactory ☐ Unsatisfactory		FAA 110A #		FAA Observer Name (Print) / Signature / District Office			
Grading: Q1 = Satisfactory Performance Q2 = Unsatisfactory performance, and training was accomplished and re-checked satisfactory (if more than two (2) events are graded Q2, the proficiency check must be graded as Q3 (unsatisfactory performance)) (Q2 cannot be given during certification events or during a re-check after unsatisfactory performance) Q3 = Unsatisfactory performance (pilot is de-qualified)							
Distribution: DO, CP, Crewmember Training Folder							

FORM ATM-007 09/10/2019

(ATM)

Revision: 16
Date: 11/15/2020

15.1.21.2

Form ATM-019

Rhoades Aviation, Inc.

Recurrent Pilot Training Record

Form	Rev.	Date
ATM-019	16	11/15/2020

Name <u>Gregory Ryan</u>	Employee number [REDACTED]
Training Type ☐ Recurrent captain ☒ Recurrent first officer	

Phase 1 – Recurrent ground training to be completed and signed by the certifying instructors

Code	Segment	Date Completed	Hours	Inst. Emp. #	Certifying Instructor's Signature
ACS	Air Carrier Specific		2		
EMER	Emergency training	<u>6-15-2021</u>	3	[REDACTED]	[REDACTED]
HAZ	*Hazardous materials	<u>6-14-2021</u>	2	[REDACTED]	[REDACTED]
SEC	Security Training	<u>6-14-2021</u>	2	[REDACTED]	[REDACTED]
CRM	Crew Resource Mgmt		2		
FTGE	Fatigue Education		2		
AGT	Aircraft ground training		27.0		

* Due every 24 months.

Phase 2 – Recurrent simulator/aircraft training (to be completed and signed by the instructor)

Code	Segment	A/C type	Pos	Date Completed	Hours	Inst. Emp #	Sim or A/C ID #	Instructor Signature
AFT	Flight Training / PC Prep							
WFT	**Windshear							
EET	*Extended Envelope							
PC	Prof check							
LOFT	LOFT				4			

* Due every 24 months.

**Due every 12 months.

Note: If the Chief Pilot or Flight Standards determines that a portion of the check is required to occur in the aircraft, he or she will provide instructions on how to perform the check and how to document completion of the checking event.

Certification

An instructor's signature at each location certifies that the stated ground training was completed as outlined in the RAI FAA-approved Aircrew Training Manual and that the candidate's knowledge and proficiency is determined to be satisfactory. A validating signature signified that the satisfactory completion of requirements is certified on this and accompanying forms. All completed forms are attached. [14 CFR 121.401(c), 14 CFR 121.415(a)(1)]

Flight crew status board updated by _____ on _____

Rhoades Aviation, Inc.

Recurrent Pilot Training Record

Form	Rev.	Date
ATM-019	16	11/15/2020

Recurrent Ground Training Record – Year 3						
DAY	HRS	MODULE	MODULE TITLE	DATE	INIT	Instructor(s) Signature
Day 1	8.0	ACS	Duties and Responsibilities	6-15-21	[REDACTED]	[REDACTED]
		38	Crewmember Duties and Responsibilities	6-15-21		
		38	Forms	6-15-21		
		ACS	Contents of Certificate and Ops Specs	6-15-21		
		38	Operations Specifications	6-15-21		
		38	Federal Aviation Regulations			
		ACS	Company Operations Manual			
		38	General			
		38	Operations Policies			
		38	Operations Procedures			
		38	Aircraft Maintenance			
		38	Emergency Procedures			
		ACS	Enroute & Term. Area Charting & Flt. Planning			
		38	Flight Release Procedures			
		ACS	Air Carrier Specific Training Review & Test			
		38	Runway Incursions			
		38	Weight and Balance (day 1)			
Day 2	8.0	38	Weight and Balance (day 2)			
		38	Wt. and Bal. / Performance Computations			
		38	Navigation / Instrument Approaches			
		38	Air Traffic Control (ATC)			
		38	Meteorology			
		38	Communication Procedures			
		38	Warning Systems			
Day 3	8.0	FTGE	Fatigue Education & Awareness			
		EMER	Flight Crewmember General Emergency	6-15-21		
		CRM	Flight Crewmember CRM			
		SEC	Flight Crewmember Security	6-14-21		
Day 4	8.0	39	Boeing 737-200 Lighting			
		39	Boeing 737-200 Fire Protection			
		39	Boeing 737-200 Pneumatics			
		39	Boeing 737-200 Air Conditioning & Press.			
		39	Boeing 737-200 Heating and Ventilation			
		39	Boeing 737-200 Oxygen			
Day 5	*8.0	39	Boeing 737-200 Limitations			
		39	Boeing 737-200 Landing Gear and Brakes			
		39	Boeing 737-200 Navigation			
		39	Boeing 737-200 GPS			
		39	B737-200 Aircraft Specific Review & Test			
		41	Extended Envelope Training	6-14-21		
		HAZ	Hazardous Materials (Every 24 months) *(6.0 hrs without 2.0 hrs Hazmat training)	6-14-21	[REDACTED]	[REDACTED]