## **125FS UPT QUESTIONNAIRE 2024**

PI	PERSONAL DATA									
	Last Name					DOB (MM/YY)		Phone		
	Email			Hor	metown (City,	State)	Add	Iress (City, S	State)	
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P	SCM and AFOQT PCSM				Nav	Acad Ant		Verbal	Occupation	
	PCSIVI	Pilot		Nav		Acad Apt	Acad Apt		Quant	
F	DUCATION									
	College or University			Graduation Date		Deg	egree		GPA	
F	LIGHT EXPERIENC	Dotingo								
	Aviation Certificates			Total Flight Hours			Type Ratings			
M	LITARY EXPERIENCE									
	Branch	Branch Years of Serv		ce	Grade	Grade Job Spe		y	Unit	
G	ENERAL QUESTIO	NS								
			requiren	nent	s listed on pag	ne 2?				
	1. Do you meet the medical requirements listed on page 2?									
	2. Have you ever been eliminated from commissioning training?									
	3. Have you ever been eliminated from Flight Screening or Undergraduate Pilot Training for any branch of service?									
4. Have you ever been convicted of a DUI / DWI, Felony, or Drug related offense?										
5. Have you interviewed for a UPT board in Tulsa? Year(s):										
	6. Are you a member of the Tulsa ANG?									
	7. Do you have a recommendation from a current or former member of the Tulsa ANG?									
	8. Have you received a primary or alternate pilot training slot through any program?									

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## **Medical Requirements**

- Uncorrected distant vision cannot exceed 20/200, corrected to 20/20
- Uncorrected near vision cannot exceed 20/40, corrected to 20/20
- Normal color vision & depth perception
- Standing height of 64" to 77"
- Sitting height of 34" to 40"
- Weight between 103 and 240 pounds
- Blood Pressure maximum 140/90

If answered YES to any question 2 through 8, please explain:									