



U.S. AIR FORCE

TBAS –Test of Basic Aviation Skills

Applicant Information

PLEASE COMPLETE THIS WORKSHEET BY ENTERING ALL APPROPRIATE INFORMATION
**** READ AND FILL ALL BLOCKS IF LEFT BLANK WE WILL BELIEVE IT IS NOT APPLICABLE ****

First Name: _____, MI: _____ Last Name: _____

SSN: _____ - _____ - _____ Gender (M/F): _____ DOB (MM/DD/YYYY): _____

Ethnicity: _____ Hispanic or Latino: _____ Not Hispanic or Latino: _____

Race (Check all that apply)

_____ American Indian or Alaska Native _____ White

_____ Native Hawaiian or other Pacific Islander _____ Asian

_____ Black or African American

Fill in the following about your current residence:

Zip code _____ City, State _____

Check the entry that represents your highest level of education obtained:

_____ High School Graduate _____ 1 Year College

_____ 2 Years College _____ 3 Year College

_____ Undergraduate Degree _____ Master's Degree

_____ Doctorate Degree

Enter education information:

Undergraduate Institution: _____.

Undergraduate Major: _____.

Based on a 4-point scale enter your current cumulative grade point average to two decimal places (3.25). (Note to Pilot/CSO/ABM candidates: You will be asked to show the Test Examiner your current transcripts) _____.

Check the entry that indicates your current status:

_____ AF Academy Cadet _____ ROTC Cadet/Applicant

_____ OTS Applicant (Enlisted) _____ OTS Applicant civilian

_____ Active Duty Officer _____ ANG Pilot training Applicant

_____ AF Reserve Pilot training Applicant _____ None of the above

Check the entry indicating your commissioning source:

_____ AF Academy _____ ROTC _____ OTS _____ Other (explain)

Check the entry indicating your highest aeronautical rating:

_____ None _____ Student pilot's license

_____ Private pilot's license _____ Commercial rating

_____ Airline transport rating

Enter the total number of instructional and pilot in charge flying hours you have flown as a licensed and/or unlicensed pilot. (Note to Pilot/CSO/ABM candidates: you will be asked to show the test examiner your pilot logbook before taking the TBAS test.) _____.

Check the entry(s) representing the type(s) of aircraft in which the flying hours you indicated in the previous question were accumulated)

_____ Fixed wing _____ Rotary wing _____ Single engine
_____ Multi engine _____ RPA _____ Other
_____ Certified flight instructor _____ Not applicable

AFOQT test location (Optional) _____

Email address (Optional) _____

Have you ever taken the TBAS before? Yes _____ No _____

If yes, was the test within the last six (6) months? Yes _____ No _____

If you answered yes to either question, stop and inform the test examiner, if No proceed.

Do you understand the TBAS can only be taken twice in your lifetime? Yes _____ No _____

If you answered No, contact the test examiner, if Yes proceed

Please initial each entry below.

_____ To the best of my knowledge I am physically and emotionally fit to take the test of Basic aviation skills test battery today.

_____ I understand one retest of the TBAS is allowed after 180 days from the original test date have passed. I am not aware of any physical or mental condition (i.e. personal stresses, sickness, lack of sleep, ETC), which will negatively impact my ability to perform up to my ability on the TBAS.

_____ I verify that the information on this candidate information worksheet is correct. I understand that falsification of any of the information on this worksheet will result in my disqualification from consideration for Air Force Pilot training.

_____ I understand that discussion the contents of this test with anyone other than the test administrator will result in my disqualification from consideration for Air Force Pilot training. Further, I understand discussion or disclosure of controlled test material is a violation of Article 92, UCMJ, punishable by up to 2 years hard labor and dishonorable discharge from the Armed Forces.

Signature: _____ Date: _____

Date test administered: _____

Examiner's Initials: _____

AUTHORITY: 10 U.S.C. 8013, Secretary of the Air Force; powers, duties, and delegation, as implemented by AFMAN 36-2664, Air Force Military Personnel Testing System, Executive Order 9397 (SSN) and Executive Order 13478 (PII).

PURPOSE: Used to process and track Test of Basic Aviation Skills (TBAS) results.

ROUTINE USES: For use in Personnel Selection/Classification.

DISCLOSURE: Voluntary - Failure to provide SSN will result in disqualification for TAPAS testing
AF SORN: F033 AF B, Privacy Act Request File, and F036 AF PC Q, Personnel Data Systems (PDS)