

**SPECIALTY QUALIFICATION TRAINING RECORD (SQTR)**  
**Urban Direction Finding Team**

|                        |       |             |
|------------------------|-------|-------------|
| NAME (Last, First, MI) | CAPID | DATE ISSUED |
|------------------------|-------|-------------|

**Prerequisites**

| Item          | Date Completed |
|---------------|----------------|
| Qualified GES |                |

The above listed member has completed the required prerequisite training for the urban direction finding team specialty.

\_\_\_\_\_  
UNIT/WING/REGION COMMANDER OR AUTHORIZED DESIGNEE'S SIGNATURE

\_\_\_\_\_  
DATE

**Familiarization and Preparatory Training**

| Task  | Evaluator's CAPID and Date Completed |
|---|--------------------------------------|
| Complete Task O-0010 Prepare UDF Individual Equipment |                                      |
| Complete Task P-0102 Conduct a Phone Alert            |                                      |

The above listed member has completed the required familiarization and preparatory training requirements for the urban direction finding team specialty qualification and is authorized to serve in that specialty while supervised on training or actual missions.

\_\_\_\_\_  
UNIT/WING/REGION COMMANDER OR AUTHORIZED DESIGNEE'S SIGNATURE

\_\_\_\_\_  
DATE

**Advanced Training**

| Task  | Evaluator's CAPID and Date Completed |
|---|--------------------------------------|
| Complete Task O-0201 Use a Compass  |                                      |
| Complete Task O-0205 Locate A Point On A Map Using The CAP Grid System                                    |                                      |
| Complete Task O-0214 Determine And Plot An Azimuth On A Map   |                                      |
| Complete Task O-0218 Locate Own Position On A Map Using Terrain Association                               |                                      |
| Complete Task O-0220 Move From Point To Point In A Vehicle Using A Map                                    |                                      |
| Complete Task O-0301 Determine Distress Beacon Bearing  |                                      |
| Complete Task O-0302 Locate a Distress Beacon   |                                      |
| Complete Task O-0303 Deactivate a Distress Beacon   |                                      |
| Complete Task O-0304 Triangulate on a Distress Beacon Signal  |                                      |
| Complete Task O-0420 Perform an Airfield Search (Ramp check)  |                                      |
| Complete Task L-0001 Basic Radio Procedures for ES Operators  |                                      |
| Complete Task L-0002 Perform Radio Operations Procedures  |                                      |
| Complete Task L-0003 Employ appropriate radio frequencies and repeaters                                   |                                      |
| Complete Task L-0101 Inspect a vehicle  |                                      |
| Complete Task P-0101 Keep a Log   |                                      |
| Complete Basic Communications User Training   |                                      |
| Complete the appropriate portion of CAPT 117, <i>Emergency Services Continuing Education examinations</i> |                                      |

**Exercise Participation**

The above listed member satisfactorily participated as an urban direction finding team trainee under my direct supervision on mission number \_\_\_\_\_.

\_\_\_\_\_  
QUALIFIED SUPERVISOR'S SIGNATURE

\_\_\_\_\_  
DATE

The above listed member satisfactorily participated as an urban direction finding team trainee under my direct supervision on mission number \_\_\_\_\_.

\_\_\_\_\_  
QUALIFIED SUPERVISOR'S SIGNATURE

\_\_\_\_\_  
DATE

**Unit Certification and Recommendation**

The above listed member has completed the requirements for the urban direction finding team specialty qualification and is authorized to serve in that specialty on training or actual missions.

\_\_\_\_\_  
UNIT/WING/REGION COMMANDER OR  
AUTHORIZED DESIGNEE'S SIGNATURE

\_\_\_\_\_  
DATE

### SINGLE TASK EVALUATION

| TASK TITLE<br><b>PREPARE URBAN DF TEAM INDIVIDUAL EQUIPMENT</b> |   | TASK NUMBER<br>O- 0010                       |                            |
|---|---|--|----------------------------|
| ITEM  | PERFORMANCE STEP DESCRIPTION  | SCORE (Check One Only)                       |                            |
|   |   | PASS   | Fail                       |
| 1   | Has all required items.   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   | <b>NOTE: ALL REQUIRED ITEMS MUST BE PRESENT IN ORDER FOR THE STUDENT TO PASS THIS TASK.</b> | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   | See Task Guide for specifics.   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID  |   | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID  |   | TITLE  |                            |
| EVALUATOR'S SIGNATURE   |   | DATE   |                            |

### SINGLE TASK EVALUATION

| TASK TITLE<br>CONDUCT PHONE ALERT |  | TASK NUMBER<br>P- 0102                       |                            |
|-----------------------------------|--|--|----------------------------|
| ITEM                              | PERFORMANCE STEP DESCRIPTION   | SCORE (Check One Only)                       |                            |
|                                   |  | PASS   | Fail                       |
| 1                                 | Asks questions to ensure he or she knows the Type of Mission, Expected Duration of Mission | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                   | Time & Location of Meeting Place, Mission number, any special instructions & call back #.  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2                                 | Writes down all information  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 3                                 | Calls all personnel directly below him/her on the alert roster.                            | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 4                                 | Passes on all information, and finds out who will be attending.                            | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 5                                 | If someone is not there, call the personnel that person was responsible for calling.       | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 6                                 | Follows correct procedures to report back up the roster after making the calls.            | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID            |  | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID          |  | TITLE  |                            |
| EVALUATOR'S SIGNATURE             |  | DATE   |                            |

### SINGLE TASK EVALUATION

| TASK TITLE<br><b>USE A COMPASS</b> |   | TASK NUMBER<br>O- 0201                       |                            |
|------------------------------------|---|--|----------------------------|
| ITEM                               | PERFORMANCE STEP DESCRIPTION                                  | SCORE (Check One Only)                       |                            |
|                                    |   | PASS   | Fail                       |
|                                    | Determines an azimuth.  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 1                                  | Correctly uses the centerhold or compass-to-cheek technique.  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2                                  | Determines the azimuth to the distant point +/- 5 degrees     | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 3                                  | Completes the above steps within 2 minutes.                   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                    | Follows an azimuth.   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 1                                  | Successfully moves to the target and determines it's marking. | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2                                  | Completes the task in less than 45 minutes.                   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                    |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                    |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                    |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                    |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                    |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                    |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                    |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                                    |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID             |   | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID           |   | TITLE  |                            |
| EVALUATOR'S SIGNATURE              |   | DATE   |                            |

**SINGLE TASK EVALUATION**

| TASK TITLE<br>LOCATE A POINT ON A MAP USING THE CAP GRID SYSTEM |   | TASK NUMBER<br>O- 205                        |                            |
|---|---|--|----------------------------|
| ITEM  | PERFORMANCE STEP DESCRIPTION  | SCORE (Check One Only)                       |                            |
|   |   | PASS   | Fail                       |
| 1   | Announces the correct grid number and quadrant within 1 minute of time. | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2   | Finds the correct numbered grid and quadrant within 1 minute of time.   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID  |   | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID  |   | TITLE  |                            |
| EVALUATOR'S SIGNATURE   |   | DATE   |                            |

### SINGLE TASK EVALUATION

| TASK TITLE<br><b>PLOT AN AZIMUTH ON A MAP</b> |  | TASK NUMBER<br>O- 0214                       |                            |
|---|--|--|----------------------------|
| ITEM  | PERFORMANCE STEP DESCRIPTION   | SCORE (Check One Only)                       |                            |
|   |  | PASS   | Fail                       |
| 1   | Draws a line from the point along the correct azimuth +/- 2 degrees within 2 minutes | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID                        |  | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID                      |  | TITLE  |                            |
| EVALUATOR'S SIGNATURE                         |  | DATE   |                            |

### SINGLE TASK EVALUATION

| TASK TITLE<br><b>LOCATE OWN POSITION ON A MAP USING TERRAIN ASSOCIATION</b> |   | TASK NUMBER<br>O- 0218                       |                            |
|---|---|--|----------------------------|
| ITEM  | PERFORMANCE STEP DESCRIPTION                                    | SCORE (Check One Only)                       |                            |
|   |   | PASS   | Fail                       |
| 1   | Determines 4 cardinal directions                                | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2   | Identifies the terrain feature on which he is located           | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 3   | Identifies terrain features around location                     | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 4   | Orients map to ground   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 5   | Relates the terrain features on the ground to those of the map. | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 6   | Identifies own location on Map (+/- 100 meters)                 | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 7   | Performs all steps within 5 minutes                             | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID  |   | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID  |   | TITLE  |                            |
| EVALUATOR'S SIGNATURE   |   | DATE   |                            |



### SINGLE TASK EVALUATION

| TASK TITLE<br>MOVE FROM POINT TO POINT IN A VEHICLE USING A MAP |   | TASK NUMBER<br>O- 0220                       |                            |
|---|---|--|----------------------------|
| ITEM  | PERFORMANCE STEP DESCRIPTION  | SCORE (Check One Only)                       |                            |
|   |   | PASS   | Fail                       |
| 1   | Successfully finds all three points, and reports the numbers (see task guide).        | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2   | Returns within 1 hour   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 3   | Does not perform any unsafe action or direct the driver to perform any unsafe action. | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID  |   | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID  |   | TITLE  |                            |
| EVALUATOR'S SIGNATURE   |   | DATE   |                            |

### SINGLE TASK EVALUATION

| TASK TITLE<br><b>DETERMINE DISTRESS BEACON BEARING</b> |  | TASK NUMBER<br>O- 0301                       |                            |
|--|--|--|----------------------------|
| ITEM   | PERFORMANCE STEP DESCRIPTION   | SCORE (Check One Only)                       |                            |
|  |  | PASS   | Fail                       |
| 1  | Correctly put the DF equipment into operation.                                     | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2  | Uses DF and REC (as applicable) to determine the direction to the practice beacon. | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 3  | Points out the direction to the practice beacon +/- 10 degrees.                    | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 4  | Completes all steps within 10 minutes  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID                                 |  | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID                               |  | TITLE  |                            |
| EVALUATOR'S SIGNATURE                                  |  | DATE   |                            |

### SINGLE TASK EVALUATION

| TASK TITLE<br><b>LOCATE A DISTRESS BEACON</b> |  | TASK NUMBER<br>O- 0302                       |                            |
|---|--|--|----------------------------|
| ITEM  | PERFORMANCE STEP DESCRIPTION   | SCORE (Check One Only)                       |                            |
|   |  | PASS   | Fail                       |
|   | Within 30 minutes the individual:  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 1   | Correctly puts the DF equipment into operation.  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2   | Locates distress/practice beacon (more time may be needed for urban/airport searches). | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID                        |  | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID                      |  | TITLE  |                            |
| EVALUATOR'S SIGNATURE                         |  | DATE   |                            |

### SINGLE TASK EVALUATION

| TASK TITLE<br>DEACTIVATE A DISTRESS BEACON |  | TASK NUMBER<br>O- 0303                       |                            |
|--|--|--|----------------------------|
| ITEM                                       | PERFORMANCE STEP DESCRIPTION   | SCORE (Check One Only)                       |                            |
|  |  | PASS   | Fail                       |
|  | The team member states he or she would:  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 1  | Immediately report the find to mission base.   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2  | Attempt to find owner  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 3  | If owner is not available, attempt to locate FBO, marina operator or law enforcement.      | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 4  | Turns off distress beacon and disconnects battery (actually demonstrates this).            | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 5  | Monitor 121.5 to ensure distress beacon is deactivated.                                    | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 6  | Leave a distress beacon sticker or note behind   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 7  | Inform the mission coordinator: (actually gather this information off the distress beacon) | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  | a. Manufacturer, make, model and serial # of the distress beacon.                          | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  | b. Battery type and expiration date.   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  | c. Time of deactivation.   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  | d. Aircraft or boat ID # (if applicable)   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  | e. Any other pertinent information.  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 8  | If the distress beacon cannot be deactivated, cover the antenna with an antenna tent.      | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID                     |  | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID                   |  | TITLE  |                            |
| EVALUATOR'S SIGNATURE                      |  | DATE   |                            |

### SINGLE TASK EVALUATION

| TASK TITLE<br><b>TRIANGULATE ON A DISTRESS BEACON SIGNAL</b> |   | TASK NUMBER<br>O- 0304                       |                            |
|--|---|--|----------------------------|
| ITEM   | PERFORMANCE STEP DESCRIPTION                                | SCORE (Check One Only)                       |                            |
|  |   | PASS   | Fail                       |
| 1  | Describes both methods of determining locations to DF from. | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2  | Locates the practice beacon within 500 meters.              | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 3  | Completes step 2 within 10 minutes.                         | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID                                       |   | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID                                     |   | TITLE  |                            |
| EVALUATOR'S SIGNATURE  |   | DATE   |                            |

**SINGLE TASK EVALUATION**

| TASK TITLE<br><b>PERFORM AN AIRFIELD SEARCH (RAMP CHECK)</b> |   | TASK NUMBER<br>O- 0420                       |                            |
|--|---|--|----------------------------|
| ITEM   | PERFORMANCE STEP DESCRIPTION  | SCORE (Check One Only)                       |                            |
|  |   | PASS   | Fail                       |
|  | The team leader:  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 1  | Contacts the FBO and identifies himself and mission                       | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2  | Describes how he would use his team to:                                   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  | a. Check for landing/takeoff/refueling logs.                              | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  | b. Conduct interviews of people at the airport.                           | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  | c. Search the flight line and hangers                                     | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 4  | Does not leave inexperienced team members to operate without supervision. | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 5  | Requests and receives permission to depart from mission base.             | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 6  | Leaves mission base information with the FBO before departing             | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID                                       |   | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID                                     |   | TITLE  |                            |
| EVALUATOR'S SIGNATURE  |   | DATE   |                            |

**SINGLE TASK EVALUATION**

| TASK TITLE<br>BASIC COMMUNICATIONS PROCEDURES FOR ES OPERATIONS |   | TASK NUMBER<br>L- 0001                       |                            |
|---|---|--|----------------------------|
| ITEM  | PERFORMANCE STEP DESCRIPTION  | SCORE (Check One Only)                       |                            |
|   |   | PASS   | Fail                       |
| 1   | Listen before transmitting  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2   | Demonstrate calling procedures including call signs                                   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 3   | Demonstrate use/understanding of basic prowords                                       | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 4   | Demonstrate understanding of radio equipment including finding local repeater/simplex | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID  |   | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID  |   | TITLE  |                            |
| EVALUATOR'S SIGNATURE   |   | DATE   |                            |

**SINGLE TASK EVALUATION**

| TASK TITLE<br><b>PERFORM RADIO OPERATING PROCEDURES</b> |   | TASK NUMBER<br>L- 0002                       |                            |
|---|---|--|----------------------------|
| ITEM  | PERFORMANCE STEP DESCRIPTION  | SCORE (Check One Only)                       |                            |
|   |   | PASS   | Fail                       |
| 1   | Demonstrate setting volume and squelch levels for proper function   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2   | Demonstrate proper microphone technique                             | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 3   | Demonstrate listening before transmitting                           | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 4   | Properly call and acknowledge aircraft                              | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 5   | Send change of grid assignment, using proper phonetics and prowords | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 6   | Correctly interpret urgency signal and take appropriate action      | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 7   | Update mission communications status boards                         | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|   |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID                                  |   | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID                                |   | TITLE  |                            |
| EVALUATOR'S SIGNATURE                                   |   | DATE   |                            |



### SINGLE TASK EVALUATION

| TASK TITLE<br>EMPLOY APPROPRIATE RADIO FREQUENCIES AND REPEATERS |   | TASK NUMBER<br>L- 0003                       |                            |
|--|---|--|----------------------------|
| ITEM   | PERFORMANCE STEP DESCRIPTION                                | SCORE (Check One Only)                       |                            |
|  |   | PASS   | Fail                       |
| 1  | Identifies the primary simplex frequency and its use.       | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2  | Identifies the alternate simplex frequency and its use.     | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 3  | Identifies the primary duplex frequency pair and its use.   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 4  | Identifies the alternate duplex frequency pair and its use. | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 5  | Identifies the primary HF SSB frequency for the region      | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 6  | Identifies the alternate HF-SSB frequency for the region    | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 7  | Completes all steps within 2 minutes                        | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID   |   | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID   |   | TITLE  |                            |
| EVALUATOR'S SIGNATURE  |   | DATE   |                            |

## SINGLE TASK EVALUATION

| TASK TITLE<br><b>INSPECT A VEHICLE</b> |  | TASK NUMBER<br>L- 0101                       |                            |
|--|--|--|----------------------------|
| ITEM                                   | PERFORMANCE STEP DESCRIPTION   | SCORE (Check One Only)                       |                            |
|  |  | PASS   | Fail                       |
| 1                                      | Demonstrates a proper vehicle inspection noting the evaluator created problem. | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|  |  | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID                 |  | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID               |  | TITLE  |                            |
| EVALUATOR'S SIGNATURE                  |  | DATE   |                            |

## SINGLE TASK EVALUATION

| TASK TITLE<br>Keep a Log |   | TASK NUMBER<br>P- 101                        |                            |
|--------------------------|---|--|----------------------------|
| ITEM                     | PERFORMANCE STEP DESCRIPTION                  | SCORE (Check One Only)                       |                            |
|                          |   | PASS   | Fail                       |
|                          | For each of the 10 event/actions the student: | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 1                        | Logs the time and event                       | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| 2                        | Writes legibly and completely                 | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                          |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                          |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                          |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                          |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                          |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                          |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                          |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                          |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                          |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                          |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                          |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
|                          |   | <input type="checkbox"/> P                   | <input type="checkbox"/> F |
| STUDENT'S NAME & CAPID   |   | TASK STATUS<br><input type="checkbox"/> PASS |                            |
| EVALUATOR'S NAME & CAPID |   | TITLE  |                            |
| EVALUATOR'S SIGNATURE    |   | DATE   |                            |