ASM (ATP or ATS) Competency Check

Name:			Date:	
Location:			Flight Time:	
Aircraft Make/Model:			Aircraft N#:	
Crew Position:			Type of Check:	
Evaluate all the applicable items:				
(+) Satisfactory (-) Unsatisfactory - Unsatisfactory requires Remarks				
Evaluati	on			Evaluation
Pre-Flight		Tactics (low level)		
Crew Brief		Personnel Location		
Aircraft Setup		Sep	Separation	
Radio Setup		Situ	Situational Awareness	
Preparation		Inter-Cockpit Communication		
Organization		Over Target		
Fire Order Information		Drop Evaluation		
Enroute		CRM		
Use of Time	Team		amwork	
Knowledge of the Environment		Judgment		
Air to Ground Communication	Emerger		ergency Procedures	
Tactics/Reconnaissance		Ver	bal Skills	
Approaching the Incident	No		n-Verbal Skills	
Scouting the Area		Risk Analysis		
Hazard Identification		Oth	ner	
Risk Mitigation				
Approach and Exit				
Procedures				
Remarks:				
Result of Checkride:				
Check Airman Name and Signature:				
ATP or ATS Name and Signature:				