

Certificate Qualification Statement

AJT-21 Contract Operations Group



Federal Aviation
Administration

The CERTIFICATE QUALIFICATION STATEMENT is completed when an applicant has satisfactorily demonstrated (to a certified observer) the ability to take weather observations.

CERTIFICATE QUALIFICATION STATEMENT

(Print Candidate's Name) is under my supervision and is a candidate to take aviation weather observations at (Print Candidate's Duty Station)

For transferees only:

The candidate is a transfer from (Print Candidate's Previous Duty Station), and holds certificate number (Print Candidate's Certificate Number)

I, the Presiding Observer, acknowledge and confirm the candidate has demonstrated the ability to take and record accurate and timely weather observations.

(Presiding Observer's Signature and Date)

(Presiding Observer's Certificate Number)

I, the undersigned, acknowledge and confirm the candidate's eyesight meets the vision standards specified in National Weather Service Instruction (NWSI) 10-1304 Certification of Observers.

(ATM/SWO/NF-OBS/SAWRS Manager's Signature and Date)

Failure to include the required signature on this statement will delay or suspend issuing the applicant's "Certificate of Authority to take Aviation Weather Observations".