



FORMAL SCHOOL REQUEST (FSR)

*DELETES FORM & SIGNATURES

1. MEMBER INFO

NAME DOD ID

RANK UNIT PERSONAL EMAIL

GTC EXP DATE ETS SECURITY CLEARANCE

DAFSC PAFSC CAFSC MILITARY STATUS

2. COURSE/TRAINING INFO (Click > ETCA Website)

COURSE TITLE

COURSE ID/NUMBER TYPE OF COURSE LOCATION

COURSE LENGTH
DAYS WEEKS MONTHS
= =

3. TRAINING AVAILABILITY

FIRST AVAILABLE DATE LAST AVAILABLE DATE

AVAILABLE FOR SHORT NOTICE DATE? # DAYS REQUIRED
YES (14 DAY NOTIFICATION) FOR NOTIFICATION
NO PRIOR TO CLASS
REMARKS: START DATE

4. CFM APPROVAL

CFM APPROVAL NEEDED?
Yes Is member on Med Profile?
No

SUPERVISOR SIGNATURE

I CERTIFY that I have reviewed and approve this request for training. The timeframe does not conflict with mission requirements.

SUPERVISOR SIGNATURE

4. SERVICE COMMITMENT (SELECT ONE)

ENLISTED COURSE

Technical Training Course: **Less than 20 Weeks**

Technical Training Course:
Greater than 20 Weeks & Less than 12 Months

Technical Training Course: **Greater than 12 Months**

Enlisted PME In Residence (ALS, NCOA, SNCOA)

Aircrew Course

OFFICER COURSE

Qualification Training - Current Aircraft (Upgrade/Mission)

Undergraduate Pilot Training (UPT)

Squadron Officer School (SOS)

Technical Training Course: **Less than 20 Weeks** (incl. AIS)

Technical Training Course:
Greater than 20 Weeks & Less than 12 Months
(incl. ACSC & AWC)

Technical Training Course: **Greater than 12 months**

CALCULATED SERVICE COMMITMENT

MONTHS

UTM SIGNATURE

I CERTIFY that I have reviewed and approve this request. Member meets all course pre-requisites and/or special requirements to attend this training IAW DAFMAN 36-2100, AFECDD, AFOCD, ETCA and/or other applicable directives/ instructions to include the CFM approval required course listing.

UTM SIGNATURE

MEMBER AGREEMENT & SIGNATURE

I UNDERSTAND & CERTIFY THAT:

This training request does not guarantee my attendance.

If selected, I am obligated to attend this training.

I have coordinated and received approval to attend with my civilian employer and/or military supervisor.

My personal obligations **will not** conflict with the dates requested on this form.

I have a current and passing Air Force PT Test.

My Air Force PT Test will remain current through the completion of the course (courses less than 6 months).

I understand that in accordance with DAFMAN 36-2100, Attachment 3, a service commitment will generate as a result of my attendance, and I must extend or reenlist to cover the required period (Enlisted), or sign a written agreement to serve the prescribed period (Officer). I understand training attendance is prohibited unless the service agreement is completed and that all commitments incurred as a result of training will begin on the day after my training has been completed.

I have an active GTC and DTS account.
NOTE: If the answer is NO, **do not** submit form!

I cannot cancel the issued TLN if the school start date is less than 45 days unless approved by the wing commander.

MEMBER SIGNATURE



UNIT COMMANDER (CC) SIGNATURE

I CERTIFY that I have reviewed and hereby approve this request for training, which is required or necessary to meet mission requirements.

CC SIGNATURE