



MASTER INSTRUCTOR ACTIVITY COMPLETION FORM

*****Make additional photocopies of this form as needed*****

Applicant's Name: _____

_____ **Check here if this is an aerobatic activity.**

Each activity submitted for credit must be accompanied by a completed Master Instructor Activity Completion Form (ACF) and the required appropriate supporting documentation. The Board of Review will not solicit activity verification or documentation on a candidate's behalf. Numerous examples of acceptable documentation are listed below. All documentation must include applicant's name and must verify the nature of the activity, the total time involved in the activity, and the activity's inclusive dates.

QUESTIONS? Contact the Board at 303-485-8136

Check category: **Educator** **Continuing Ed** **Service** **Media** **Participant**

Identify activity completed: _____

Hours spent completing activity: _____ Inclusive date(s): _____

Statement of activity relevance: _____

Please check documentation included and attach documentation to this form:

- | | |
|-------------------------------------|--|
| Graduation / completion certificate | Copy of student / instructor / DPE logbook entries |
| Grade report / test results | Class roster, contract, pay stubs, etc |
| Course syllabus / course outline | Copy of authored material |
| Committee / board meeting minutes | FAA/industry forms (FAA forms 8710, 8060-4/5, etc) |
| Chief CFI / manager signoff | Receipts / invoices |
| Verification letters / e-mails * | Other, <i>specify</i> : _____ |

* Have verification e-mails sent to applicant and include a copy with portfolio

In lieu of attaching the required supporting documentation, have the agency or individual sponsoring this activity complete the following verification affidavit:

(NOTE: Master Instructor candidates may not sign themselves off in the section below.)

Sponsor: _____ Official's name, title: _____

Address: _____ Official's signature: _____

City/State: _____ Telephone: _____

E-mail address(s): _____