

COMMANDER'S TASK LIST

For use of this form see TC 3-04.11; the proponent agency is TRADOC.

PRIVACY ACT STATEMENT

Authority: 10 USC 3013 Secretary of the Army, AR 95-1 Flight Regulations

Principal Purpose: To track Aircrew Members' Flight Records

Routine Uses: The routine uses outlined in the applicable system of records notice (SORN) applies to this collection

Disclosure: Voluntary. Disclosure of birth month is voluntary; however this form will not be processed without the Aircrew Member's birth month

Citation: A0095-1a TRADOC, Centralized Aviation Flight Records System (SAFRS) (June 29, 2010, 75 FR 37410)

PART I. BIOGRAPHICAL

Name:	Rank:	DoD ID:	Birth Month:	FAC:
Duty Title:	Aircraft Type: <input type="checkbox"/> Primary <input type="checkbox"/> Additional <input type="checkbox"/> Alternate			

PART II. AUTHORIZED FLIGHT DUTIES/STATIONS

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Remarks
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

PART III. FLYING-HOUR REQUIREMENTS

	Annual	First Period	Second Period	Remarks/Adjustment
Dates				
Total Aircraft Hours				
Total Simulator Hours				
Night Unaided Hours				
NVG Hours				
Hood/Weather Hours				
Other Hours				
Other Hours				

PART IV. ANNUAL REQUIREMENTS

	Designated Period (AC/USAR) or Qtr (ARNG)	Remarks/Date Completed

PART V. CERTIFICATION

This form and its enclosure(s) establish your Aircrew Training Program Requirements.

Commander:	Signature:	Effective Date:
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I certify that I have read and understand my ATP requirements contained on this form and its enclosure(s).

Crew Member's Signature:	Date:
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Instructions for completing DA Form 7120

Item	Instructions
Part I - Biographical	
Name	Enter ACM's name (last, first, middle initial).
Rank	Enter one of the following: military rank, DAC, CIV, CTR, or leave blank if not applicable.
DOD ID	The Department of Defense identification number is a unique 10-digit code located on the CAC. Use of the SSN or portions of the SSN is prohibited.
Birth Month	Enter the ACM's birth month.
FAC	Enter the flight activity category for the position the ACM is assigned (as required). Leave blank if not applicable.
Duty Title	Enter the primary duty title according to MTOE or TDA (company aviation safety officer). Leave blank if not applicable.
Aircraft Type	Enter the aircraft mission, type, design, and series (UH-60A or HH-60A) for which the Department of the Army Form 7120 applies. Place an "X" in the appropriate box to show primary, additional, or alternate aircraft.
Part II - Authorized Flight Duties/Stations	
Crew Station	Using the drop down menu, select the appropriate crew station.
Crew Duty Position	Using the drop down menu, select the appropriate crew duty position.
Remarks	Enter sufficient remarks to explain changes made to designated crew duties and or duty stations after this form's initiation.
Part III - Flying-Hour Requirements	
Dates	Enter the dates of the annual, first period semi-annual, and second period semi-annual.
Total Aircraft Hours	Enter the total hours, prorated as applicable, for each semi-annual period.
Total Simulator Hours	Enter the total hours, prorated as applicable, for the annual period.
Night Unaided Hours	Enter the total hours for night unaided flight, prorated as applicable, for each semi-annual period.
NVG Hours	Enter the total hours for NVG flight, prorated as applicable, for each semi-annual period.
Hood/Weather Hours	Enter the total hours for simulated instrument (H) and actual instrument (W) flight, prorated as applicable, for each semi-annual period.
Other Hours (optional)	Enter the type of flight hours required (CBRN) prorated as applicable, for each semi-annual period.
Part IV - Annual Requirements	
Evaluation	Using the drop down menu, select the appropriate evaluation.
Designated Period	Record the designated period in the form MMM YY-MMM YY (Jan 19-Mar 19)
Remarks/Date Completed	Record any pertinent remarks and annotate the date the evaluation was completed (19 Jan 19)
Part V - Certification	
Commander	Enter the commander's name (William C. Adama, CPT, AV)
Signature	The commander digitally or physically places his/her signature here prior to the ACM's first flight.
Effective Date	The commander enters the effective date of his/her signature.
Crew Members Signature	The ACM digitally or physically places his/her signature here.
Date	The ACM enters the date he/she signs the form.