

**ORANG UPT QUESTIONNAIRE 2022**

<b>PERSONAL DATA</b>					
Last Name		First Name		DOB (MM/YY)	Phone
Email		Hometown (City, State)		Address (City, State)	
<b>PSCM and AFOQT</b>					
PCSM	Pilot	Nav	Acad Apt	Verbal	Quant
<b>EDUCATION</b>					
College or University		Graduation Date	Degree		GPA
<b>FLIGHT EXPERIENCE</b>					
Aviation Certificates		Total Flight Hours		Type Ratings	
<b>MILITARY EXPERIENCE</b>					
Branch	Years of Service	Grade	Job Specialty		Unit
<b>GENERAL QUESTIONS</b>					
1. Do you meet the medical requirements listed on page 2?					
2. Have you ever been eliminated from commissioning training?					
3. Have you ever been eliminated from Flight Screening or Undergraduate Pilot Training for any branch of service?					
4. Have you ever been convicted of a DUI / DWI, Felony, or Drug related offense?					
5. Have you interviewed for a UPT board in Oregon? Year(s):					
6. Are you a member of the Oregon ANG?					
7. Do you have a recommendation from a current or former member of the Oregon ANG?					
8. Have you received a primary or alternate pilot training slot through any program?					

**Medical Requirements**

- Uncorrected distant vision cannot exceed 20/200, corrected to 20/20
- Uncorrected near vision cannot exceed 20/40, corrected to 20/20
- Normal color vision & depth perception
- Standing height of 64" to 77"
- Sitting height of 34" to 40"
- Weight – between 103 and 240 pounds
- Blood Pressure – maximum 140/90

**General Question Explanations:**