



TRAINING VERIFICATION

TR-005

NAME: Mitchel Jones POSITION: Mechanic - DHC-6 DATE: 7/9/20

EMPLOYEE NO: 564 CERT. NO.: 3597332 LOCATION: Deadhorse, AK

TYPE OF TRAINING RECEIVED: RII Training CUSTOMER/VENDOR: MHI

ON-THE-JOB

OTHER

MAINTENANCE INFORMATION LETTER: (MIL) _____

SPECIFY: _____

SUBJECT OF TRAINING	TYPE OF ACFT / EQUIPMENT	HOURS	ATA CHAPTER AND SUBCHAPTER
DHC-6-400 RII Inspection Items		16 Hours	

I hereby acknowledge that I have received the training described above.

TRAINEE SIGNATURE: [Signature] EMPLOYEE NO.: 564

PRINTED NAME: Mitchel Jones

DELEGATED INSTRUCTOR: Brent Estep EMPLOYEE NO.: 395

INSTRUCTOR SIGNATURE: [Signature]

REMARKS:

Training administered by: **Written** **Oral** **Practical**

RETURN TO: Training Manager



Rev – Orig: 06/01/2020

The following form shall be used to document training on each Flight Crewmember Repairmen RII Tasks listed in Appendix B.

COMMENTS: Mitchell Jones

INSTRUCTOR'S SIGNATURE

DATE: 7-9-20

CREWMEMBERS SIGNATURE

DATE: 9 JUL 2020



TRAINING VERIFICATION

TR-005

NAME: Chris Stout POSITION: Mechanic-DHC-6 DATE: 7/9/20

EMPLOYEE NO.: 565 CERT. NO.: 2714433 LOCATION: Deadhorse, AK

TYPE OF TRAINING RECEIVED: RII Training CUSTOMER/VENDOR: MHI

ON-THE-JOB

OTHER

MAINTENANCE INFORMATION LETTER: (MIL) _____

SPECIFY: _____

SUBJECT OF TRAINING	TYPE OF ACFT / EQUIPMENT	HOURS	ATA CHAPTER AND SUBCHAPTER
DHC-6-400 RII Inspection Items		16 Hours	

I hereby acknowledge that I have received the training described above.

TRAINEE SIGNATURE: [Signature] EMPLOYEE NO.: 565

PRINTED NAME: Chris Stout

DELEGATED INSTRUCTOR: Brent Estep EMPLOYEE NO.: 395

INSTRUCTOR SIGNATURE: [Signature]

REMARKS:

Training administered by: **Written** **Oral** **Practical**

RETURN TO: Training Manager



Rev – Orig: 06/01/2020

The following form shall be used to document training on each Flight Crewmember Repairmen RII Tasks listed in Appendix B.

COMMENTS: Chris Stout

John De

DATE: 7-9-20

DATE:



TRAINING VERIFICATION

TR-005

NAME: Jeremy Lister POSITION: Mechanic – DHC-6 DATE: 7/9/20

EMPLOYEE NO: 523 CERT. NO.: 3742498 LOCATION: Deadhorse, AK

TYPE OF TRAINING RECEIVED: RII Training CUSTOMER/VENDOR: MHI

ON-THE-JOB

OTHER

MAINTENANCE INFORMATION LETTER: (MIL) _____

SPECIFY: _____

SUBJECT OF TRAINING	TYPE OF ACFT / EQUIPMENT	HOURS	ATA CHAPTER AND SUBCHAPTER
DHC-6-400 RII Inspection Items		16 Hours	

I hereby acknowledge that I have received the training described above.

TRAINEE SIGNATURE: [Signature] EMPLOYEE NO.: 523

PRINTED NAME: Jeremy Lister

DELEGATED INSTRUCTOR: Brent Estep EMPLOYEE NO.: 395

INSTRUCTOR SIGNATURE: [Signature]

REMARKS:

Training administered by: **Written** **Oral** **Practical**

RETURN TO: Training Manager



Rev – Orig: 06/01/2020

The following form shall be used to document training on each Flight Crewmember Repairmen RII Tasks listed in Appendix B.

COMMENTS: Jeremy Lister

Re Lu

DATE: 7-9-22

~~[Signature]~~

DATE: 7-9-20

TRAINING ACTIVITY REPORT

TR-004

COURSE TITLE: Part 135 RII Repairmen/Mechanic Trainer COURSE NO. N/A DATE: 07/05/20

CLASSROOM START TIME: 10:am CLASS HOURS: 4 INSTRUCTOR: Brent Estep

PRINT NAME	EMP NO.	TYPE OF CERTIFICATE	CERTIFICATE NUMBER	SIGNATURE	DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	TOTAL HRS.	FINAL GRADE
Chris Stout	565	A&P	2714433		4 hr	4 hr	4 hr	4 hr		16	Pass
Mitchell Jones	564	A&P	3597332		4 hr	4 hr	4 hr	4 hr		16	Pass
Jeremy Lister	523	A&P	3742498		4 hr	4 hr	4 hr	4 hr		16	Pass

COMMENTS: DHC-6-400 Only

INSTRUCTOR'S SIGNATURE  DATE: 07/09/20