

**UNITED STATES MARINE CORPS**

MARINE HELICOPTER SQUADRON ONE  
2134 ROWELL ROAD  
QUANTICO, VIRGINIA 22134-5061

2014 HMX-1 PILOT VOLUNTEER QUESTIONNAIRE

NAME: \_\_\_\_\_ DCTB: \_\_\_\_\_ EAS: \_\_\_\_\_  
(Last, First, M)  
SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ HT: \_\_\_\_\_ WT: \_\_\_\_\_  
Grade: \_\_\_\_\_ DOR: \_\_\_\_\_ PME COMPLETE (Y/N): \_\_\_\_\_  
Callsign: \_\_\_\_\_ Department Head Tour Complete (Y/N)  
PMOS: \_\_\_\_\_ Selected Grade: \_\_\_\_\_  
AMOS(1): \_\_\_\_\_ Overseas Control Date: \_\_\_\_\_  
AMOS(2): \_\_\_\_\_ Rotation Date: \_\_\_\_\_  
Anticipated Promotion Board/Date: \_\_\_\_\_ / \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Home Email: \_\_\_\_\_  
Phone (Primary): \_\_\_\_\_ (Alt): \_\_\_\_\_ (Ter): \_\_\_\_\_  
Unit Address: \_\_\_\_\_  
Work Phone/DSN: \_\_\_\_\_ Comm: \_\_\_\_\_  
Flight Time Total: \_\_\_\_\_ Helo Time Total: \_\_\_\_\_  
Helo Experience by Type/Model: \_\_\_\_\_  
Projected Flight Time Total:      6 Months: \_\_\_\_\_      12 Months: \_\_\_\_\_  
Instructor Quals: \_\_\_\_\_  
Flight Leadership Quals: \_\_\_\_\_  
Standardization Quals: \_\_\_\_\_  
Deployments: \_\_\_\_\_  
\_\_\_\_\_

Previous Duty Assignments (Chronological Order, starting from the FRS)

Unit	Billet	Time Period	Reporting Senior/OIC	CO
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Is there anything in your background that causes you to believe that you and your spouse would not be able to successfully complete a rigid background investigation? Rigid meaning that trained investigators will look into all aspects of your personal history with no limits placed on how far back in time they will look. Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been involved (either as a Pilot in Command, Pilot at the Controls, Copilot, or Wingman) in an aircraft or ground mishap? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, briefly describe (Class \_\_, Summary):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Are you on any medical waivers for flight status? Yes \_\_\_\_\_ No \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This volunteer form is the basic document for your selection into HMX-1. If your qualifications, flight hours, job or mailing address change, update them by calling the Recruiting and Selection Officer, HMX-1, DSN 284-2000, Ext. 44815, or Comm (571) 494-4815. Please do not contact HMX-1 inquiring about your selection status. Selection notifications will be made as soon as possible from the Command.