

Kirtland Flight Center Cross Country Request (Rev. 17 June 2007)

Place in Chief Flight Instructor's In-Basket for Approval

Departure Date:	Departure Time:	Return Date:
Aircraft Type:	Preferred Tail Number:	Number of Seats Required:
Number of Days:	Estimated # of Flight Hours:	Purpose: <i>(select one)</i> Pleasure CAP TDY Training
Proposed Route of Flight		Proposed Fuel Stops (ID & City, State)
Passengers		
1.		3.
2.		4.
Pilot's Name:	Signature:	
Member #:	Work Phone: Home Phone:	
Approval Date:	Approver's Signature:	