

**Qualification Examiner (QE) REQUEST FORM**

(To Be Submitted by the FC or FSO-MT)

From:

Date:

I am requesting a QE for the following purpose(s):

Coxswain Initial Qualification:   
 Crew Initial Qualification:   
 PWC Initial Qualification:   
 Nav Rule Testing:

Coxswain 3 Year Maint:   
 Crew 3 Year Maint:   
 PWC 3 Year Maint:

The requested date and time:

Location (Marina, Dock, or Facility):

Directions to Location:

Alternate dates and times:

Please list candidate names, Member #, Division/Flotilla, and Qualification desired below (Please add a contact phone number for each candidate):

NAME	Member #	DIV # / FLOT #	Init Qual/3 Year Maint

Name & Facility# of Boats Involved in Exercise	COXSWAIN

**Ensure the candidate has the following:**

- Candidate’s Qualification Guide completed with mentor signatures and dates all tasks.
- Candidate possesses proof of completion of all tasks (Nav-Rules, TCT, ICS, etc.)
- 3 year Currency Maintenance candidates must bring Appendix F from the new Auxiliary Boat Crew Training Manual, COMDTINST M16794.51A already filled out with candidate’s information and signed by the candidate's FSO-IS.

**Email completed form at least 3 weeks prior to requested date to the Chief QE Coordinator:**

Gail Ramsey; E-mail: [QE-request@d11nuscgaux.info](mailto:QE-request@d11nuscgaux.info)