

# ON-THE-JOB TRAINING CERTIFICATION

EMPLOYEE \_\_\_\_\_ RTG SYM \_\_\_\_\_

ON-THE-JOB TRAINING WAS RECEIVED BY THIS EMPLOYEE ON \_\_\_\_\_ (date) \_\_\_\_\_

AND I CERTIFY THEIR COMPETENCY TO PERFORM THE FOLLOWING TASK:

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A. TASK CARD NUMBER \_\_\_\_\_ ON TYPE \_\_\_\_\_ AIRCRAFT.

B. ATA SYSTEM \_\_\_\_\_ OR SUBSYSTEM \_\_\_\_\_

ON TYPE \_\_\_\_\_ AIRCRAFT.

OJT HOURS PERFORMED: \_\_\_\_\_

COMMENTS:

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Designated O-J-T Instructor

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Employee Acknowledgement