

The following items are required in order to be placed into the pre-employment process for the Air and Marine Operations, AIA (pilot) position. By signing below, you are certifying that you meet the initial qualifications and will be able to provide supporting documentation to support your answers as requested during the hiring process. This document is supplemental and does not replace an individual's resume for qualification purposes.

1. I have a FAA Commercial or ATP pilot certificate # \_\_\_\_\_ dated \_\_\_\_\_  
Please select your preferred aircraft for the Three Part Assessment  
\_\_\_\_\_ Airplane \_\_\_\_\_ Rotorcraft Helicopter
2. I have logbook records showing a total of (select only one):  
\_\_\_\_\_ 1,500 flight hours or more  
\_\_\_\_\_ 1,000 flight hours to 1,499 flight hours (*you must complete flight-hour waiver request form*)  
\_\_\_\_\_ 750 flight hours to 999 flight hours (*you must complete flight-hour waiver request form*)

\*I understand that I must accrue additional flight hours up to the waived minimum at my own expense.

Total Flight Hours: \_\_\_\_\_ PIC Hours: \_\_\_\_\_ Night Hours: \_\_\_\_\_ Instrument Hours: \_\_\_\_\_

3. I have logbook records showing 250 Pilot in Command hours, 75 Night hours and 75 Instrument hour (actual and/or simulated/hood) Yes No
4. I have a current FAA Class 1 dated \_\_\_\_\_ or FAA Class 2 dated \_\_\_\_\_ or Military.  
\*Certificate must be dated within the last 12 months to be considered valid. At the time of Flight Assessment, FAA Class 1 is required.

5. I have logged 100 hours in the past 12 months. Yes No

6. Current FAR 61.56 flight review (bi-annual), or successful completion of a formal military pilot evaluation (USN NATOPS Check, USAF Form 8, U.S. Army APART, or equivalent) within the previous 24 months.  
Last completed on \_\_\_\_\_ (MM/YYYY). Will be verified at Three Part Assessment.  
\_\_\_\_\_ I understand that I must have a current FAR 61.56 flight review or meet the Part 61 Certification requirements at my own expense.

7. I have been employed as a full-time professional pilot or posses aviation law enforcement experience for a minimum of 1 year. Yes No  
I have been employed as a part-time professional pilot or posses aviation law enforcement experience for a minimum of 2 years. Yes No  
Number of hours worked per week \_\_\_\_\_.

8. I certify that I have the experience of flying as a Pilot in Command or sole manipulator in an airplane or helicopter in all environments of flight, including night, poor weather, unfavorable terrain and low altitudes or airspeeds. Yes No

9. I have served or currently serve as a member of the U.S. Armed Forces. Yes No

\*If "Yes", please include a scanned copy of your Member 4 DD214, or if on active duty, a Statement of Service (SOS) indicating your dates of service, rank, medals you have been awarded and confirmation that you will be separated under honorable conditions.

10. Please provide your Date of Birth (MM/DD/YYYY) \_\_\_\_\_.

11. Are you a U.S. Citizen? Yes No

12. Have you resided in the U.S. for 3 out of the last 5 years? Yes No

13. If you are a male born after December 31, 1959, have you registered with the Selective Service System? Yes No N/A

\*If you answered "No", additional information will be required before a qualification determination can be made.

14. Do you have a current valid state driver's license, or will you be able to obtain a valid state driver's license at the time of appointment? Yes No

15. Have you engaged in sexual abuse in prison, jail holding facility, community confinement facility, juvenile facility, or other institution as defined in 42 U.S.C. § 1997? Yes No

16. Have you been convicted of engaging or attempting to engage in sexual activity facilitated by force, overt or implied threats of force, or coercion, or where the victim did not consent or was unable to consent or refuse, or have you been civilly or administratively adjudicated to have engaged in such activity?

Yes No

17. Conviction of a misdemeanor crime of domestic violence, as outlined in the vacancy announcement, is disqualifying. A misdemeanor crime of domestic violence is any offense involving the use of physical force, or the threatened use of a deadly weapon, committed by a current or former domestic partner, parent, or guardian of the victim. Have you ever been convicted of a misdemeanor crime of domestic violence? Yes No

18. Have you ever been previously employed by AMO? Yes No

19. Have you ever applied to the Air Interdiction Agent position before? Yes No

I certify the information on this document to be true and accurate. I will provide the supporting documentation to confirm this information upon request. I further understand that false information may be grounds for removal from the pre-employment process at any time.

Signed by me on the \_\_\_\_\_ day of \_\_\_\_\_ 2024

Printed – First Name, Last Name

Signature Required

**BIOGRAPHICAL INFORMATION SHEET**

Provide your Social Security Number (SSN): \_\_\_\_\_

Provide your current full address: \_\_\_\_\_

Provide your most recent e-mail address: \_\_\_\_\_

Provide your most recent telephone number including area code (1 number is required, 2 numbers is optional)

Earliest Availability Date to Enter On Duty (EOD): \_\_\_\_\_

CBP does not collect personal identifiable information (PII) about you unless you choose to provide that information to the agency. Any personal identifiable information (PII) you choose to provide is protected by privacy and security practices. If found qualified for the Air Interdiction Agent position, and to be entered into pre-employment through the paper process, you will need to submit personal identifiable information (PII).

Applicants who receive a tentative offer of employment must successfully complete a polygraph examination. Provided below is a list of locations where polygraph examinations are offered. Please select the location where you prefer to complete your polygraph examination. CBP will do its best to schedule you at your preference location. However, you may be required to travel to attend the polygraph. CBP will not reimburse you for travel to or from the polygraph site. You will be contacted by the Office of Professional Responsibility to schedule the required polygraph examination. (Select One Location)

- |                                |                                |
|--------------------------------|--------------------------------|
| _____ AZ: Tucson [1001]        | _____ NJ: Newark [1007]        |
| _____ AZ: Yuma [1002]          | _____ NY: Buffalo [1018]       |
| _____ CA: San Diego [1003]     | _____ NY: Jamaica (JFK) [1019] |
| _____ CA: Laguna Niguel [1004] | _____ TN: Nashville [1048]     |
| _____ CA: Long Beach [1005]    | _____ TX: El Paso [1021]       |
| _____ CA: San Francisco [1006] | _____ TX: Houston [1022]       |
| _____ FL: Miramar [1010]       | _____ TX: Irving [1023]        |
| _____ FL: Orlando [1011]       | _____ TX: McAllen [1025]       |
| _____ GA: Atlanta [1040]       | _____ TX: San Antonio [1046]   |
| _____ IL: Chicago [1013]       | _____ WA: Seattle [1007]       |
| _____ IN: Indianapolis [1014]  | _____ Washington, DC [1008]    |
| _____ ME: Portland [1035]      |                                |
| _____ MI: Detroit [1015]       |                                |
| _____ MN: Bloomington [1016]   |                                |

# REQUEST FOR FLIGHT HOUR WAIVER

The information in this form will be used by AMO to determine flight time waivers for Air Interdiction Agent (pilot) applicants that do not meet the prescribed flight experience minimums for the position.

Initial

- I have flight hours as a flight instructor. \_\_\_\_\_
- I have flight hours flying a multi-engine aircraft. \_\_\_\_\_
- I have flight hours flying with night vision devices. \_\_\_\_\_
- I have flown in areas the U.S. Government has considered imminent danger zones. Yes  No  \_\_\_\_\_
- I have experience flying over difficult/dangerous terrain and/or over water. Yes  No  \_\_\_\_\_

I certify the information provided on this document to be true and accurate. I will provide supporting documentation to confirm this information upon request at any time during the hiring process. I further understand that false information may be grounds for removal from the pre-employment process at any time.

Signed by me on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_  
Printed- First Name, Last Name

\_\_\_\_\_  
Signature