**Parachute Training Device (PTD) Qualification Statement**

| PTD Number: | Insert |
| --- | --- |
| Serial Number: | Insert |
| Parachute System Type(s): | Insert Parachute System Type(s) |
| Located at: | Insert PTD location address |

**PTD Data Sheet**

| A | Mark or Variant of Parachute System: | Insert Parachute System Mark / Variant |
| --- | --- | --- |
| B | Visual System: | eg Head mounted display |
| C | Weather and Environmental: | eg Day or Night |
| D | Additional Capabilities: | eg with Equipment, O2 system |
| E | Restrictions or Limitations: | Insert any restrictions on qualifications and currency. Insert any training objectives that cannot be conducted in the PTD. Insert specific profiles that cannot be conducted in specific environmental conditions |
| F | Material Differences to Live Parachute System: | Insert any differences between the PTD and the Live Parachute System |
| G | Risk of Negative Training that may Increase Risk to Life (RtL) in Live Parachute System: | Insert any profiles that may induce negative training for the live Parachute System and increase RtL |

| H | Guidance Information for Training, Testing and Checking Considerations |
| --- | --- |

| Currency | Yes / No If Yes, list currency training regimes that can be conducted |
| --- | --- |
| Competency | Yes / No If Yes, list all competency training regimes that can be conducted |
| Certificate of Qualification on Type | Yes / No If Yes, list any restrictions and limitations that should also be recorded at line L |
| Proficiency Checks | Yes / No If Yes, list all proficiency checks that can be conducted |

| Other |  |
| --- | --- |