

Attachment 1

**2023 USAF Test Pilot School
Space Test Course Application Form**

Applicant Name (Last, First, MI): _____ **Rank/Grade:** _____

Organization: _____

Phone: _____ **Email:** _____

AFSC/Series: _____ **Job Title:** _____

Security Clearance & Investigation Date: _____

Years of Government Service: _____ **Preferred start date:**

Why do you want to attend the Space Test Course?

What job experience do you bring that is relevant to the Space Test Course?

Applicant Signature: _____ **Date:** _____

Commander/Director Endorsement

I _____ **recommend** _____ **for the**
STC, and will ensure he/she is briefed to TS/SCI prior to class start date.

Signature: _____ **Date:** _____

Phone: _____ **Email:** _____