CNATRA–GEN 1542/31 (REV. 1–77)
S/N 0197LLCF04323

Insert this form in the ATJ for each action/incident.

TYPE ACTION

- ☐ UNSATISFACTORY
  - ☐ Flight
  - ☐ Academic
  - ☐ Synthetic
  - ☐ Flight Support
  - ☐ _____
- ☐ DELINQUENCY
  - ☐ Flight Violation (F.A.R.)
  - ☐ Flight Violation (Local)
  - ☐ _____
- ☐ ACCIDENT ***(Refer to OPNAVINST 3750.6)***
- ☐ INCIDENT ***(Refer to OPNAVINST 3750.6)***
- ☐ _____

BRIEF SUMMARY

ACTION TAKEN

- ☐ Awarded____of extra instruction/supervised study
- ☐ Awarded reexamination in _____
- ☐ Awarded ____extra time flights
- ☐ Awarded recheck of _____
- ☐ Awarded____extra time synthetic flights
- ☐ _____
- ☐ Referred to Student Progress Disposition Board
- ☐ Awarded____Demerits and_____Extra Duty
- ☐ Referred to _____ Investigation
- ☐ Captain's Mast
- ☐ Recommended separate from training
- ☐ _____

COMMENTS

SIGNATURE *(Appropriate Authority)*	RANK/TITLE	DATE

ACCIDENT/INCIDENT

CURRICULUM FLIGHT NO.	AIRCRAFT MODEL	BUNO	AIRCRAFT DAMAGE CODE	INJURY CLASS CODE

STUDENT REVIEW

SIGNATURE *(Student)* *(I have reviewed my jacket this date)*	DATE	RANK	SSN

STUDENT'S NAME *(Last, First, Middle Initial)*	TRARON	PHASE

UNSATISFACTORY/DELINQUENCY/INCIDENT (ATJ)

RESET

EMAIL TO: