

**U.S. Coast Guard Auxiliary, District Thirteen
Boat Crew (BC) Currency Maintenance for 2006**

<u>Member Name:</u>		<u>Member #:</u>	
<u>Patrol Order #:</u>		<u>Boat Registration #:</u>	<u>Date:</u>
Boat Crew Qualification Level (check one): <input type="checkbox"/> CREWMEN <input type="checkbox"/> COXSWAIN			
<input type="checkbox"/> Annual or <input type="checkbox"/> Fifth Year (check one) <i>QE Signature required for fifth year currency</i>			

Crewman Tasks (ACW)	Coxswain Signature	Date	Coxswain Tasks
BCM-03-04 AUX: Assist with pre-underway check off			COX-03-04-AUX: Complete pre-underway check off
BCM-07-02 AUX: Participate in a man overboard evolution As a recovery/pick-up person.			COX-07-02-AUX: Rescue a person from the water using the direct pick-up method
BCM-07-05 AUX: Pass a towline to another boat and take in stern tow			COX-08-05-AUX: Take a vessel in stern tow
BCM-07-08 AUX: Take a boat in alongside tow			COX-08-07-AUX: Take a boat in alongside tow
BCM-06-04/05-AUX: Plot a Position Using Latitude and Longitude & Plot a Magnetic Course on a Nautical Chart			BCM-06-06/10-AUX: Plot a Single Unit Sector Search Pattern (VS) & Execute a Search Pattern
<i>Any currently qualified Coxswain may sign off any Crewman tasks for annual currency maintenance. Any currently qualified Coxswain may self certify tasks for annual currency maintenance. Every fifth year after qualification, these tasks must be witnessed, and this form completed by a Boat Crew Qualification Examiner (QE). After entry by SO-IS, return this form to DIRAUX.</i>			

Annual Certification (must be signed by a qualified coxswain)

(check one)

- Crewman: I certify that the crew member listed has performed in my presence, the tasks required for annual certification.
 Coxswain: I certify that I (or the member listed) has completed the tasks required for annual certification.

Signature: _____ Date: _____

Fifth Year Certification (must be completed/signed by a QE)

(check one)

- Crewman: I certify that the crew member listed has performed in my presence, the tasks required for annual certification.
 Coxswain: I certify that I (or the member listed) has completed the tasks required for annual certification.
 Nav Rules: Open book Navigation Rules exam completed with a 90% score. (Answer sheet attached or entered in AUXDATA).

Signature: _____ Date: _____

DIRAUX Endorsement

(Check One)

- Crewman: 8 hours underway on Coast Guard ordered missions during the current year has been verified in AUXDATA.
 Coxswain: 8 hours underway on Coast Guard ordered missions during the current year as Coxswain has been verified in AUXDATA.
 All requirements in annual certification complete. (i.e. Ops Workshop, etc.)
 All requirements for 1st, 2nd, 3rd, 4th year re-certification are complete. Listed Crew/Coxswain will be re-installed and is eligible to receive orders.

Signature: _____ Date: _____

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<u>Patrol Order #:</u>	<u>Boat Registration #:</u>	<u>Date:</u>	
Boat Crew Qualification Level (check one): <input type="checkbox"/> CREWMEN <input type="checkbox"/> COXSWAIN			
<input type="checkbox"/> 1 st Year Re-Cert <input type="checkbox"/> 2 nd Year Re-Cert <input type="checkbox"/> 3 rd Year Re-Cert <input type="checkbox"/> 4 th Year Re-Cert (Check One)			

1st Year Re-Certification:

Crew/Coxswain failed to complete the annual certification requirements during the previous calendar year. **Re-Certification Requirements:** Crew/Coxswain must complete the annual certification tasks (see reverse side) and complete 8 hours underway on patrol at the level qualified as trainee under the supervision of a certified coxswain or QE. *Get Re-certified by DIRAUX, then complete 8 hours underway on patrol at the level qualified prior to the end of the year to maintain their currency.*

- I certify that the Crew/Coxswain listed has preformed the tasks required for re-certification as indicated on the reverse side of this form.
- I certify that the listed Crew/Coxswain has completed the required 8 hours underway on patrol under the supervision of a certified coxswain or QE. (Documentation such as an activity report is required)

Coxswain/QE Printed Name: _____ Signature: _____ Date: _____

2nd, 3rd, or 4th Year Re-Certification:

2nd Year []3rd Year []4th Year []

(Check the year of recertification)

Crew/Coxswain failed to complete the annual certification requirements during the previous 2nd, 3rd or 4th calendar year (refer to year checked above).

Re-Certification Requirements: Crew/Coxswain must complete the annual certification tasks (see reverse side) and complete 8 hours underway on patrol at the level qualified as trainee and complete a check ride under the supervision of a certified QE. *Get Re-certified by DIRAUX, then complete 8 hours underway on patrol at the level qualified prior to the end of the year to maintain their currency.*

- I certify that the Crew/Coxswain listed has preformed the tasks required for re-certification as indicated on the reverse side of this form.
- I certify that the listed Crew/Coxswain has completed the required 8 hours underway on patrol under the supervision of a certified QE. (Documentation such as an activity report is required)
- I certify that the Crew/Coxswain has satisfactorily completed the required check ride IAW current directives.

QE Printed Name: _____ Signature: _____ Date: _____

AUXDATA ENTRY

By: _____, SO-IS 130-_____ Date: _____

SEND ENTERED FORM TO **DIRAUX**