**NATIONAL WEATHER SERVICE**

**Certificate Qualification Statement**

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| The **CERTIFICATE QUALIFICATION STATEMENT** is completed when an applicant has satisfactorily demonstrated ability (to a certified observer) to properly take weather observations. **The Certificate should be used by those individuals who will be taking the written examination at a location other than their own facility.** The Certificate should be given to the Proctor of the written certification examination. A certified observer’s name and the Weather Certificate Number is required of the supervisor is not the certified observer to whom the trainee demonstrated observer proficiency. This Certificate should be attached to the answer sheet by the Proctor of the examination. |
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| **CERTIFICATE QUALIFICATION STATEMENT** |

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|  | is under my supervision and is assigned to | | | |
| *(Print test applicant’s name)* |  | | | |
| take aviation weather observations at |  | | | . |
|  | *(Print test applicant’s duty station)* | | |  |
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| The examinee’s eyesight meets the vision standards specified in NWS Instruction  10-1301, Appendix D, Section 5.1. | | | | |
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| The examinee has demonstrated the ability to take and record accurate and timely weather observations. I consider the examinee fully qualified to perform these duties. | | | | |
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| *(Supervisor’s Signature and Date)* | |  | *(Weather Certificate Number)* | |
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|  | | | | |
|  | |  |  | |
| *(Certified Observer’s Name)* | |  | *(Weather Certificate Number)* | |
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| ***Failure to include the required name, signature, and certificate number on this form will delay or may suspend issuing the applicant’s “Certificate of Authority toTake Weather Observations”.*** |