

**Center for Naval Aviation Technical Training Detachment Whiting Field**  
**SUPERVISOR FEEDBACK**

**Privacy Act Advisory:**

The sole reason for requesting personal identifiable information (PII) in this website is to allow you to provide feedback on training programs, request information regarding training programs, or request to attend a training course. PII provided by you will not be maintained in a system of records but will be used to respond to your inquiry or to provide you with the service associated with your request. Every effort will be made to protect your PII, including appropriate disposal, once action has been taken on your feedback/request.

Please be advised that this website is a public website and with limited security for submitting information. Do not use the website to transmit classified information.

Please also note that failure to provide certain PII, i.e., your contact information, via this website may result in your request not being processed. However, you may also contact our command via telephone. Please see our site contacts page for details.

**Fraud, Waste and Abuse or Criminal Activity:**

If your e-mail message relates to fraud, waste, and abuse; criminal activity; or terrorism, your e-mail message will be forwarded to the appropriate officials for action.

**Supervisor Feedback Form:**

AMO and AOOCP are pleased to hear from our customers on any training issues or concerns. Our Student Feedback program is one avenue for active-duty, reserve military or civilian personnel to communicate their training issues directly to this schoolhouse. Each student has several opportunities to provide feedback while under training using one of three types of course critiques. However, there undoubtedly will be occasions when the student would like to provide additional comment after graduation. To provide feedback on any training issue or to make a recommendation, please complete and submit the form below.

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**Your Information**

Date:

Name:

Command/Activity:

Unit UIC:

Email Address:

Phone # (DSN/COM):

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**Recent AOOCP School Graduate Information**

Name:

Rank/Rate:

Billet/Position of AOOCP School Graduate:

Date reported onboard:

Does our product meet your needs?    Yes    No

Are there any trend areas?    Yes    No

**If yes** what trend areas?

What other recommendation do you feel will help AOOCP School better serve our customers (you)?