

INDIVIDUAL PHYSIOLOGICAL TRAINING RECORD

(For officers this record will be kept as a permanent part of the Aircrew Standardization/Evaluation Folder.
For airmen this record will be kept as a permanent part of the 201 file.)

LAST NAME—FIRST NAME—MIDDLE INITIAL HARRISON, MARSHALL G.		GRADE CAPT	AFSN A03040294
TYPE OF TRAINING	PERCENT GRADE	AIR FORCE BASE	DATE
ORIGINAL PHASE			
REFRESHER PHASE	SATIS	LITTLE ROCK AFB	10 Aug 64
PASSENGER PHASE			
Refresher	88	Andrews AFB, Md.	5 Jul 67
REFRESHER		Andrews AFB, Md.	8 JUL 67
NIGHT VISION TRAINER			
EJECTION SEAT TRAINER			
PARTIAL PRESSURE SUIT			
FULL PRESSURE SUIT			
PRESSURE SUIT REFRESHER			
MISCELLANEOUS			
RAPID DECOMPRESSION		WESTOVER AFB	20 Sep 61
CHARLES A. LUDY CAPT USAF			

REMARKS

IN **VIDUAL PHYSIOLOGICAL TRAINING RE** **RD**
 (For officers this record will be kept as a permanent part of the AF Form 5 file.
 For airmen this record will be kept as a permanent part of the 201 file.)

LAST NAME - FIRST NAME - MIDDLE INITIAL HARRISON, Marshall G.		GRADE 1st Lt.	SERVICE NUMBER AO 3040294
TYPE OF TRAINING	PERCENT GRADE	AIR FORCE BASE	DATE
ORIGINAL PHASE			
REFRESHER PHASE	90 60	DMAFB, Arizona	6 Mar 58 ✓ <i>Marshall G. Harrison</i>
PASSENGER PHASE			
SAC Combat Crew Physiological Training Refresher Course Satisfactorily completed. Valid until <u>20 SEP 1964</u>	<i>Marshall G. Harrison</i>		<i>Bobby D. Bottom</i> BOBBY D. BOTTOM, 1st Lt., USAF Physiological Training Officer
NIGHT VISION TRAINER		DMAFB, Arizona	6 Mar 58 <i>Marshall G. Harrison</i>
EJECTION SEAT TRAINER			
PARTIAL PRESSURE SUIT			
MISCELLANEOUS			
Rapid Decompression		DMAFB, Arizona	6 Mar 58 <i>Marshall G. Harrison</i>
36 Month Prof. Exam, Grade Achieved: 88%		MCCOY AFB, FLA.	EXPIRES 6 Mar 62 <i>Edward T. Hall, Jr.</i> EDWARD T. HALL, JR., 1st Lt., USAF, MSC
REMARKS			

C E R T I F I C A T E

I certify that I received Ejection Seat Tower Training
at BRYAN AFB AFB, _____ on
or about DEC 1955. The Ejection
Seat Tower was (Check one) 20 feet, 60 feet,
 100 feet. Other specifications: _____
(if needed)

Marshall G. Garrison
(Signature and Rank)

USAF CERTIFICATION OF QUALIFICATION

THIS IS TO CERTIFY THAT

Marshall G. Harrison, Major

(Name and Grade)

1st Composite Wing

(Organization)

HAS SATISFACTORILY COMPLETED THE TRAINING OR SPECIAL QUALIFICATION INDICATED HEREON

The following will be completed when individual transfers from unit

DATE	TYPED NAME AND GRADE OF REVIEWING OFFICIAL	
	SIGNATURE	

AF FORM 1281

USAF CERTIFICATION OF QUALIFICATION

THIS IS TO CERTIFY THAT

HARRISON

MAJOR

19TASS

(Name and Grade)

(Organization)

HAS SATISFACTORILY COMPLETED THE TRAINING OR SPECIAL QUALIFICATION INDICATED HEREON

TRAINING REQUIREMENT/SUBJECT TITLE	DATE COMPLETED	CERTIFYING OFFICIAL
Survival Inst	6 Nov 68	Huber
PSS	13 Jun 69	Huber

The following will be completed when individual transfers from unit.

THE FOLLOWING WILL BE COMPLETED WHEN INDIVIDUAL TRANSFERS FROM UNIT:

DATE	TYPED NAME AND GRADE OF REVIEWING OFFICIAL	SIGNATURE
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