K.14 FIT-TO-OPERATE DECLARATION

MISSION / DATE	**ROLE / NAME**
HEALTH ☐ FIT ☐ CONTROL ☐ NOT FIT	**SLEEP / FATIGUE** ☐ FIT ☐ CONTROL ☐ NOT FIT
MEDICATION / SUBSTANCE ☐ FIT ☐ CONTROL ☐ NOT FIT	**STRESS / ATTENTION** ☐ FIT ☐ CONTROL ☐ NOT FIT
FOOD / HYDRATION ☐ FIT ☐ CONTROL ☐ NOT FIT	**ENVIRONMENT / PPE** ☐ FIT ☐ CONTROL ☐ NOT FIT
COMPETENCE / RECENCY ☐ FIT ☐ CONTROL ☐ NOT FIT	**TOTAL STATUS** ☐ FIT ☐ CONTROL ☐ NOT FIT
CONTROL / REASSIGNMENT	**REVIEW TIME**
DECLARED BY	**RPIC / SUPERVISOR**

DECLARATION RULE Declare limitations early. The record protects the decision; it is not a substitute for operator policy or professional medical advice.

ANNEX K RECORD HANDLING

TABLET — Complete the required form(s). Save or export only the completed Annex K pages to the mission archive; keep this master unchanged.

WIPE-CLEAN COPY — Use a suitable non-permanent pen. Scan or transfer the record, verify it is complete and readable, then wipe the reusable form clean.

DO NOT ERASE OR OVERWRITE until the archived copy has been verified.