



DEPARTMENT OF  
HOMELAND SECURITY  
U.S. COAST GUARD  
ANSC 7038 (01-06)

**U.S. COAST GUARD AUXILIARY  
ACTIVITY REPORT  
VESSEL EXAMINATIONS**

Division \_\_\_\_ Flotilla \_\_\_\_

**AUXDATA USE ONLY**

**UMS A UADMS VSC PB**

EG: \_\_\_\_ EP: \_\_\_\_ T: \_\_\_\_ HR: \_\_\_\_ 1<sup>ST</sup> \_\_\_\_

**UMS A UADMS VSC FACI**

EG: \_\_\_\_ EP: \_\_\_\_ T: \_\_\_\_

**UCG A CGOPS CVS CFV**

EG: \_\_\_\_ EP: \_\_\_\_ T: \_\_\_\_

**UCG A CGOPS MS UPV**

EG: \_\_\_\_ EP: \_\_\_\_ T: \_\_\_\_

**UCG A CGOPS MS TBOAT**

EG: \_\_\_\_ EP: \_\_\_\_ T: \_\_\_\_

**UCG A CGOPS MS BI**

EG: \_\_\_\_ EP: \_\_\_\_ T: \_\_\_\_

**UCG A CGOPS MD TOW**

EG: \_\_\_\_ EP: \_\_\_\_ T: \_\_\_\_

**SECTION I - MEMBER INFORMATION**

Member ID	Last Name and Initials	ROLE
		LEAD
		TRAINEE
		TRAINEE
		TRAINEE

**SECTION II - EXAM/VISIT INFORMATION**

	GIVEN	PASSED	HOURS	HI RISK	1 <sup>ST</sup> TIME
Vessel Safety Checks					
Vessel Facility Inspections					
Commercial Fishing Vessel Exams					
Uninspected Passenger Vessel Exams					
T-BOAT Inspections					
Barge Inspections					
Uninspected Towing Vessel Exams					

**SECTION III - REMARKS**

*Use Member Activity Log (ANSC-7029) to record travel and prep time associated with this activity. Submit VSC Action Information Notification (ANSC-7045) for problems performing VSCs, or to report Federal or Local Requirement problems. See the form for more information. Supporting paperwork for each type of check must accompany this report per your district's instructions. See general instructions on page two.*

Date submitted

Report number

*Previous edition is obsolete and may NOT be used*

A. GENERAL

1. This form is used to report the completion of vessel examinations under the VE Program and to enter into each examiner's record the number of Vessel Examinations given and passed during the year. Each examiner's totals are automatically added to the member's flotilla, division, and district totals. **Record all Prep and Travel time previously reported on this form on ANSC-7029 - Member Activity Log.**
2. Submit this report in accordance with district policy, but at least monthly. Multiple types of exams may be reported on one form. When completed, forward via FSO-IS, to the SO-IS for input into AUXDATA. Upon completion of data entry, SO-IS makes distribution per their district policy.
3. **AUXDATA USE ONLY** box is for IS personnel use ONLY. Make NO manual entries in this area. Computer filled in forms will have automatic entries made in this area. That is as intended.

B. DIVISION-FLOTILLA - Enter your two digit division number and two digit flotilla number.

C. SECTION I - MEMBER DATA

1. **MEMBER ID & NAME - LEAD:** Report Examiner Here- Enter the 7 digit member ID number of the Examiner and name. If you had a Trainee(s) complete the succeeding information.
2. **MEMBER ID & NAME - TRAINEE:** Report any Trainee(s) Here- Enter the 7 digit member ID number(s) of the Trainee(s) and the Trainee's name. The Trainee(s) must complete five (5) successive inspections to qualify for VE status.

C. SECTION II - EXAM INFORMATION

1. **VSC EXAMS GIVEN:** Enter the total of all VSCs completed for report period. Report canoes, kayaks and other un-motorized vessels as VSC type.
2. **EXAMS PASSED:** Enter the total number of VSCs *passed* for report period.
3. **HOURS:** Enter number of hours spent performing the VSCs.
4. **HI RISK:** Provide the total number of high-risk vessel VSCs given. A HI RISK VSC is defined as any vessel check in which *any* of the following are checked: "Length:" box checked is <16 ft or 16-25, "Other" is checked in the "Powered by" line, or the "Type" is PWC or Other. All other VSCs are not considered to be of HI RISK vessels.
5. **1<sup>st</sup> TIME:** Provide the total number of vessels receiving a VSC for the first time. (The "First Time" box on the "Replaced decal was:" line has been checked on the ANSC 7012.
6. **VESSEL FACILITY INSPECTIONS GIVEN:** Enter the total number of Vessel Facility Inspections completed this report period. Report hours for Inspections of Air and Radio facilities on ANSC-7029.
7. **INSPECTIONS PASSED:** Enter the total number of Vessel Facility Inspections *passed*.
8. **HOURS:** Enter number of hours spent performing the Vessel Facility Inspections.
9. **CFV EXAMS GIVEN:** Enter the total number of Commercial Fishing Vessel Exams given for report period. (Not all districts will be involved in this activity.) \* See Footnote
10. **EXAMS PASSED:** Enter the total number of CFV Exams *passed*.
11. **HOURS:** Enter the number of hours spent performing CFV Exams.
12. **UPV EXAMS GIVEN:** Enter the total of Uninspected Passenger Vessel Exams completed for report period. \* See Footnote
13. **EXAMS PASSED:** - Enter the total number of UPV Exams *passed*.
14. **HOURS:** Enter the number of hours spent performing UPV Exams.
15. **T-BOAT INSPECTIONS GIVEN:** Enter the total number of T-BOAT Inspections completed this report period. (Not all districts will be involved in this activity.) \* See Footnote
16. **INSPECTIONS PASSED:** Enter the total number of T-BOAT Inspections *passed*.
17. **HOURS:** Enter the number of hours spent performing T-BOAT Inspections.
18. **BARGE INSPECTIONS GIVEN:** Enter the total number of Barge Inspections completed this report period. (Not all districts will be involved in this activity.) \* See Footnote
19. **INSPECTIONS PASSED:** Enter the total number of Barge Inspections *passed*.
20. **HOURS:** Enter the number of hours spent performing Barge Inspections.
21. **UNINSPECTED TOWING VESSEL EXAMS:** Enter the total number of UTV Exams completed this report period. (Not all districts will be involved in this activity.) \* See Footnote
22. **EXAMS PASSED:** Enter the total number of UTV Exams *passed*.
23. **HOURS:** Enter the number of hours spent performing UTV Exams.  
\* Footnote: Repeat or follow-up exams should be reported as "exams given". The "exams passed" should be entered only upon awarding of the decal, the Certificate of Documentation, Inspection or Completion – as appropriate.

D. SECTION III - REMARKS

1. When trainees are included on this report:
  - a. Indicate number of exams/inspections in which each individual trainee participated that are to be credited toward their respective required examinations/inspections under supervision.
  - b. A separate form must be submitted for each training mission, unless the same individuals participate together on multiple days. For example, if the total VSC exams for report period is ten and each of two trainees are to be credited with five each, so indicate in remarks. If the total VSC exams for the report period is seven, indicate for both trainees the number to credit each trainee. (Each exam may only be credited to one trainee.)
2. Other remarks may be included in the space provided and can be recorded in AUXDATA. Limit such remarks to 240 characters.
3. **REPORT DATE** - Enter the date in DDMMYY format (01MAR06).
4. **REPORT NUMBER** - This area is available for member's use and is not entered in AUXDATA. Number reports sequentially, or in accordance with local policy.