

**SKILL TEST CPL(A) AEROPLANE**     SE     ME

**Application and report form**

**A. Udfyldes af ansøgeren/To be filled out by the applicant:**

Date of Birth:	Certifikat nr./Licence no.: (If any)	Udstedende Stat/State of Licence Issue:
Fornavne/First name(s):		Efternavn/Last name:
Gade eller vej:/Street:		
Postnr. og by/Postal code and city:	e-mail:	Tlf./Telephone:
<b>Dato for underskrift/Date of signature:</b>	<b>Underskrift/Signature:</b>	

**B. Udfyldes af skolen/To be filled out by ATO:**

Name of ATO: (Use stamp):						
Specification of flight time						
Total:	P-I-C:	Cross-Country:	Instrument time:	Instrument Ground time:	Night:	Flight time during CPL(A) course:
Crediting of flight time (attach documentation)						
Applicant graduating from		ATP integrated course	CPL integrated course	Modular Course		
<b>Date of signature of Head of Training</b>		<b>Signature of Head of Training</b>				

**C. To be filled out by the Examiner:**

Date of test:	Licence Endorsement:	Type of aircraft:			
Name of Examiner or stamp:		Stamp of Examiner,			
Authorisation no. of Examiner or stamp:					
I hereby verify that the applicant has passed the required training and that the applicant fulfills the requirements for the test or check being performed. I also declare that I have reviewed and applied the relevant national procedures and requirements of the applicant's competent authority contained in the latest version of the Examiner Differences Document.					
<b>Date of signature of Examiner</b>		<b>Signature of Examiner</b>			
Result of the test					
Section 1: <input type="checkbox"/> Passed <input type="checkbox"/> Failed	Section 2: <input type="checkbox"/> Passed <input type="checkbox"/> Failed	Section 3: <input type="checkbox"/> Passed <input type="checkbox"/> Failed	Section 4: <input type="checkbox"/> Passed <input type="checkbox"/> Failed	Section 5: <input type="checkbox"/> Passed <input type="checkbox"/> Failed	Section 6: <input type="checkbox"/> Not Applicable <input type="checkbox"/> Passed <input type="checkbox"/> Failed
<b>Final result:</b> <input type="checkbox"/> Passed <input type="checkbox"/> Partial Pass <input type="checkbox"/> Failed					

**Use of the aeroplane checklists, airmanship, control of aeroplane by external visual reference, anti-icing/de-icing procedures and principles of threat and error management apply in all sections**

Name of Applicant:	
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<b>SECTION 1 PRE-FLIGHT OPERATIONS AND DEPARTURE</b>		<b>Passed</b>	<b>Failed</b>
a	Pre-flight, including: Flight planning, Documentation, Mass and balance determination, Weather brief, NOTAMS		
b	Aeroplane inspection and servicing		
c	Taxiing and take-off		
d	Performance considerations and trim		
e	Aerodrome and traffic pattern operations		
f	Departure procedures, altimeter setting, collision avoidance (lookout)		
g	ATC liaison – compliance, R/T procedures		

<b>SECTION 2 GENERAL AIRWORK</b>		<b>Passed</b>	<b>Failed</b>
a	Control of the aeroplane by external visual reference, including straight and level, climb, descent, look out		
B	Flight at critically low airspeed including recognition of and recovery from incipient and full stalls		
c	Turns including turns in landing configuration. Steep turns 45°		
d	Flight at critically high airspeeds, including recognition of and recovery from spiral dives		
e	Flight by reference solely to instruments, including: <ul style="list-style-type: none"> <li>i. Level flight, cruise configuration, control of heading, altitude and airspeed</li> <li>ii. Climbing and descending turns with 10° - 30° bank</li> <li>iii. Recoveries from unusual attitudes</li> <li>iv. Limited panel instruments</li> </ul>		
f	ATC liaison – compliance, R/T procedures		

<b>SECTION 3 EN-ROUTE PROCEDURES</b>		<b>Passed</b>	<b>Failed</b>
A	Control of the aeroplane by external visual reference, including cruise configuration, Range/Endurance considerations		
b	Orientation, map reading		
c	Altitude, speed, heading control, lookout		
d	Altimeter setting, ATC liaison – compliance, R/T procedures		
e	Monitoring of flight progress, flight log, fuel usage, assessment of track error and re-establishment of correct tracking		
f	Observation of weather conditions, assessment of trends, diversion planning		
g	Tracking, positioning (NDB or VOR), identification of facilities (instrument flight), implementation of diversion plan to alternate aerodrome (visual flight)		

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Name of Applicant:	
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<b>SECTION 4 APPROACH AND LANDING PROCEDURES</b>		<b>Passed</b>	<b>Failed</b>
a	Arrival procedures, altimeter setting, checks, look out		
b	ATC liaison: compliance, R/T procedures		
c	Go-around action from low height		
d	Normal landing, crosswind landing (if suitable conditions)		
e	Short field landing		
f	Approach and landing with idle power (SINGLE ENGINE ONLY)		
g	Landing without use of flaps		
h	Post flight actions		

<b>SECTION 5 ABNORMAL AND EMERGENCY PROCEDURES</b> (This section may be combined with sections 1 through 4)		<b>Passed</b>	<b>Failed</b>
a	Simulated engine failure after take-off (at a safe altitude), fire drill		
b	Equipment malfunctions, including alternative landing gear extension, electrical and brake failure		
c	Forced landing (simulated)		
d	ATC liaison: compliance, R/T procedures		
e	Oral questions		

<b>SECTION 6 SIMULATED ASYMMETRIC FLIGHT AND RELEVANT CLASS/TYPE ITEMS</b> (This section may be combined with sections 1 through 5)		<b>Passed</b>	<b>Failed</b>
a	Simulated engine failure during take-off (at a safe altitude unless carried out in a flight simulator)		
b	Asymmetric approach and go-around		
c	Asymmetric approach and full stop landing		
d	Engine shutdown and restart		
e	ATC liaison – compliance, R/T procedures, Airmanship		
f	As determined by the Flight Examiner – any relevant items of the class/type rating skill test to include, if applicable: <ul style="list-style-type: none"> <li>i. Aeroplane systems including handling of autopilot</li> <li>ii. Operation of pressurisation system</li> <li>iii. Use of de-icing and icing system</li> </ul>		
g	Oral questions		

For detailed instructions see Commission Regulation 1178/2011 Appendix 4

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Name of Applicant:	
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Details of the flight			
Destination aerodrome	On block	On ground	
Departure aerodrome	Off block	Airborne	
Aircraft registration	Total block time	Total airborne time	No. of landings:

Remarks/Overall assessment/Reasons for failure (if applicable):	
Name of instructor present at the Skill Test:	

Signature of Examiner	Signature of Applicant:
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Use of the aeroplane checklists, airmanship, control of aeroplane by external visual reference, anti-icing/de-icing procedures and principles of threat and error management apply in all sections

Name of Applicant:	
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**In accordance with ARA.GEN.315(a), (b) – (c)**

Undertegnede bekræfter hermed, at jeg ved ansøgningstidspunktet

1. ikke var i besiddelse af et personligt certifikat, rating, tilladelse eller attestation med samme anvendelsesområde og i samme kategori udstedt i en anden medlemsstat;
2. ikke har ansøgt om et personligt certifikat, rating, tilladelse eller attestation med samme anvendelsesområde og i samme kategori i en anden medlemsstat; og
3. aldrig har haft et personligt certifikat, rating, tilladelse eller attest med samme anvendelsesområde og i samme kategori udstedt i en anden medlemsstat, som er tilbagekaldt eller suspenderet i anden medlemsstat.

Note:

*Ukorrekte oplysninger vedrørende ovenstående, kan være diskvalificerende for udstedelse af certifikat, rating, tilladelse m.v.*

Undersigned hereby confirm that I at the time of application

1. was not holding any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another Member State;
2. has not applied for any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category in another Member State; and
3. has never held any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another Member State which was revoked or suspended in any other Member State.
- 4.

Note:

*Incorrect information regarding the above can be disqualifying for obtaining a certificate, rating, authorization, etc.*

Dato:/Date: \_\_\_\_\_

**Underskrift:/Signature:** \_\_\_\_\_