

SKILL TEST AEROPLANE			
IR(A)	BIR	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:
Fornavn/First name(s):		Efternavn/Last name:
Gade eller vej:/Street:		
Postnr. og by/Postal code and city:	E-mail:	Tlf./Telephone:
Dato for underskrift/Date of signature:	Underskrift/Signature:	

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

Name of ATO: (Use stamp):					
Specification of flight time					
Total:	IFR route sectors	Cross-Country:PIC	Instrument Flight Instruction	Instrument Ground time:	Night:Qualification obtained date?
Crediting of flight time (attach documentation)					
Date of signature of Head of Training			Signature of Head of Training		

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 requirement 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.					
Date of signature of Examiner	Signature of Examiner				
Result of the test					
Section 1: Passed Failed	Section 2: Passed Failed	Section 3: Passed Failed	Section 4: Passed Failed	Section 5: Passed Failed	Section 6: Not Applicable Passed Failed
Final result: Passed Partial Pass Failed				Temporary permission to exercise privileges (copy enclosed): Yes No	
RNP approach: One of the approaches flown is an RNP approach					

Use of checklist, airmanship, anti-icing/de-icing procedures, etc., apply in all sections

Name of Applicant:	
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SECTION 1 PRE-FLIGHT OPERATIONS AND DEPARTURE		Passed	Failed
Use of checklist, airmanship, anti-icing/de-icing procedures, etc., apply in all sections			
a	Use of flight manual (or equivalent) especially a/c performance calculation, mass and balance		
b	Use of Air Traffic Services document; weather document		
c	Preparation of ATC flight plan; IFR flight plan/log		
d	Identification of the required nav aids for departure, arrival and approach procedures		
e	Pre-flight inspection		
f	Weather Minima		
g	Taxiing		
h	PBN departure (if applicable) - Check that the correct procedure has been loaded in the navigation system; and - Cross-check between the navigation system display and the departure chart		
l	Pre-take off briefing; Take off		
j(*)	Transition to instrument flight		
k(*)	Instrument departure procedures, including PBN departures, and altimeter setting		
l(*)	ATC liaison – compliance; R/T procedures		

SECTION 2 GENERAL HANDLING		Passed	Failed
a	Control of the aeroplane by reference solely to instruments, including: level flight at various speeds, trim.		
b	Climbing and descending turns with sustained Rate 1 turn		
c	Recoveries from unusual attitudes, including sustained 45° bank turns and steep descending turns		
d*	Recovery from approach to stall in level flight; climbing/descending turns and in landing configuration		
e	Limited panel, stabilised climb or descent at Rate 1 turn onto given headings, recovery from unusual attitudes.		

SECTION 3 EN-ROUTE IFR PROCEDURES*		Passed	Failed
a	Tracking, including interception, e.g. NDB; VOR; RNAV		
b	Use of radio aids		
c	Level flight, control of heading, altitude and airspeed, power setting, trim technique		
d	Altimeter setting		
e	Timing and revision of ETAs (En-route hold – if required)		
f	Monitoring of flight progress, flight log, fuel usage, systems management		
g	Ice protection procedures, simulated if necessary		
h	ATC liaison – compliance, R/T procedures		

Use of checklist, airmanship, anti-icing/de-icing procedures, etc., apply in all sections

Name of Applicant:	
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SECTION 3a ARRIVAL PROCEDURES		Passed	Failed
a	Setting and checking of navigational aids, if applicable		
b	Arrival procedures, altimeter check		
c	Altitude and speed constraints, if applicable		
d	PBN arrival (if applicable): - Check that the correct procedure has been loaded in the navigation system; and - Cross-check between the navigation system display and the arrival chart		

SECTION 4 (*) – 3D OPERATIONS(++)		Passed	Failed
a	Setting and checking of navigational aids Check Vertical Path angle For RNP APCH: - Check that the correct procedure has been loaded in the navigation system; and - Cross-check between the navigation system display and the approach chart		
b	Approach and landing briefing, including descent/approach/landing checks, including identification of facilities		
c+	Holding procedure		
d	Compliance with published approach procedure		
e	Approach timing		
f	Altitude, speed, heading control, (stabilised approach)		
g+	Go-around action		
h+	Missed approach procedure/landing		
i	ATC liaison – compliance; R/T procedures		

SECTION 5 (*) – 2D OPERATIONS(++)		Passed	Failed
a	Setting and checking of navigational aids For RNP APCH: - Check that the correct procedure has been loaded in the navigation system; and - Cross-check between the navigation system display and the approach chart		
b	Approach and landing briefing, including descent/approach/landing checks, including identification of facilities		
c+	Holding procedure		
d	Compliance with published approach procedure		
e	Approach timing		
f	Altitude/Distance to MAPT, speed, heading control, (stabilised approach), Stop Down Fixes (SDF(s)), if applicable		
g+	Go-around action		
h+	Missed approach procedure/landing		
i+	ATC liaison – compliance, R/T procedures		

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, authorisation, etc.

Dato/Date:

Underskrift/Signature: