Examiner Report for UK PPL(BA) Flight Test



Please complete this form in BLOCK CAPITALS using black or dark blue ink.

Forename:

FALSE REPRESENTATION STATEMENT

It is an offence under the UK Air Navigation Order to make, with intent to deceive, any false representation for the purpose of procuring the grant, issue, renewal or variation of any certificate, licence, approval, permission or other document. This offence is punishable on summary conviction by a fine and on conviction on indictment with an unlimited fine or imprisonment or both.

Civil Aviation Authority Regulation 6

CAA Personal reference number (applicant):

1. APPLICANT DETAILS

Title:

Regulation 6(5) of the Civil Aviation Authority Regulations 1991 provides as follows: Any person who has failed any test or examination which he is required to pass before he is granted or may exercise the privileges of a personnel licence may within 14 days of being notified of his failure request that the Authority determine whether the test or examination was properly conducted.

To be completed by the Examiner and signed by the Applicant

Surname:

Series: Attempt: Date:							
I confirm I have requested the Test as detailed above (applicant's signature)							
2. FLIGHT TEST		To be com	pleted by the Examiner				
2. FLIGHT TEST Route:		To be com	pleted by the Examiner				
	Take Off Time:	To be com	Pleted by the Examiner Flight Duration:				

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2. FLIGHT TEST (continued) To be completed by the Examiner						
Test Sections:						
	Date			Date		
Preparation for Flight		Approach				
Weather Suitability		Checks				
Launch Site		Choice of Field				
Equipment Check		High Level Approach				
Load Calculation		Low Level Approach				
Fuel State		Emergency Landing	l			
Crew Briefing		Checks				
Pre-inflation		Procedure				
Rigging-Envelope		Emergencies (simul	ated)			
Rigging-Burner		Fire in the air/on the	ground			
Burner Test		Pilot light failure				
Equipment Check		Airmanship				
Inflation		Awareness				
Take-off		Look Out				
Pre-take-off Checks		Positioning, Restricte	d Air Space/Hazards			
Take-off		NFU Code				
Assessment of Wind		Fuel Management				
Straight and Level Flight		Fuel Transfer				
Climbing		Landing				
Normal		Pre-landing Checks				
Fast		Choice of Field				
Descending		Action After Flight				
Normal		Checks				
Using Parachute/Vent		Packing Away	Packing Away			
Navigation, Orientation		Landowner Consultation				
Recognition of features		Recording of Flight T	Recording of Flight Times			
Assessment of Wind						
Use of Maps						
Position Plotting						
Ü				<u>I</u>		
Date of completion of test:						
Pass	Partial Pass	3	Fail			
 I certify that: I have examined the training schedule which this applicant has completed. I have carried out flight tests during which the applicant has demonstrated his ability to perform satisfactorily the manoeuvres listed above. I am therefore satisfied that the applicant has reached the standard of flying required for the grant of a Private Pilot's Licence. 						
Examiner's Name:			Examiner's No:			
Examiner's Signature:			Date:			
Received by Applicant (signature):			Date:			

Copies of the report shall be submitted to: (1) The Applicant (2) The CAA (3) The Examiner

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