

APPLICATION AND REPORT FORM LAPL, PPL, CPL, IR SKILL TEST AND PROFICIENCY CHECK			
Applicant's last name(s):			
Applicant's first name(s):			
Signature of applicant:		LAPL:	A <input type="checkbox"/> H <input type="checkbox"/>
Type of licence*:		PPL:	A <input type="checkbox"/> H <input type="checkbox"/> As <input type="checkbox"/>
Licence number*:		CPL:	A <input type="checkbox"/> H <input type="checkbox"/> As <input type="checkbox"/>
State:		IR:	A <input type="checkbox"/> H <input type="checkbox"/> As <input type="checkbox"/>

1 Details of the flight			
Group, class, type of aircraft:		Registration:	
Aerodrome or site:	Take-off time:	Landing time	Flight time
		Total flight time:	

2 Result of the test		
Pass <input type="checkbox"/>	Fail <input type="checkbox"/>	Partial pass <input type="checkbox"/>

3 Remarks:

Location and date:			
Examiner's certificate number:		Type and number of license:	
Signature of examiner:		Name(s) in capital letters:	

<b>SECTION 1 – PRE-FLIGHT OPERATIONS AND DEPARTURE</b>			
Use of airship checklists, airmanship, control of airship by external visual reference, anti-icing procedures, and principles of threat and error management, etc. apply in all sections			
<b>Applicants license number and name:</b>		<b>Pass</b>	<b>Fail</b>
<b>a</b>	Pre-flight, including: flight planning, documentation, mass and balance, NOTAM and weather briefing	<input type="checkbox"/>	<input type="checkbox"/>
<b>b</b>	Airship inspection and servicing	<input type="checkbox"/>	<input type="checkbox"/>
<b>c</b>	Off-mast procedure, ground maneuvering and take-off	<input type="checkbox"/>	<input type="checkbox"/>
<b>d</b>	Performance considerations and trim	<input type="checkbox"/>	<input type="checkbox"/>
<b>e</b>	Aerodrome and traffic pattern operations	<input type="checkbox"/>	<input type="checkbox"/>
<b>f</b>	Departure procedure, altimeter setting, collision avoidance (look-out)	<input type="checkbox"/>	<input type="checkbox"/>
<b>g</b>	ATC compliance and R/T procedures	<input type="checkbox"/>	<input type="checkbox"/>
<b>SECTION 2 – GENERAL AIRWORK</b>			
		<b>Pass</b>	<b>Fail</b>
<b>a</b>	Control of the airship by external visual reference, including straight and level, climb, descent and look-out	<input type="checkbox"/>	<input type="checkbox"/>
<b>b</b>	Flight close to pressure height	<input type="checkbox"/>	<input type="checkbox"/>
<b>c</b>	Turns	<input type="checkbox"/>	<input type="checkbox"/>
<b>d</b>	Steep descents and climbs	<input type="checkbox"/>	<input type="checkbox"/>
<b>e</b>	Flight by reference solely to instruments, including: i. Level flight, control of heading, altitude and air speed; ii. Climbing and descending turns; iii. Recoveries from unusual attitudes.	<input type="checkbox"/>	<input type="checkbox"/>
<b>f</b>	ATC compliance and R/T procedures	<input type="checkbox"/>	<input type="checkbox"/>
<b>SECTION 3 – EN-ROUTE PROCEDURES</b>			
		<b>Pass</b>	<b>Fail</b>
<b>a</b>	Flight plan, dead reckoning and map reading	<input type="checkbox"/>	<input type="checkbox"/>
<b>b</b>	Maintenance of altitude, heading and speed and collision avoidance (look-out procedures)	<input type="checkbox"/>	<input type="checkbox"/>
<b>c</b>	Orientation, timing and revision of ETAs and log keeping	<input type="checkbox"/>	<input type="checkbox"/>
<b>d</b>	Observation of weather conditions and diversion to alternate aerodrome (planning and implementation)	<input type="checkbox"/>	<input type="checkbox"/>
<b>e</b>	Use of radio navigation aids	<input type="checkbox"/>	<input type="checkbox"/>
<b>f</b>	Flight management (checks, fuel systems, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
<b>g</b>	ATC compliance and R/T procedures	<input type="checkbox"/>	<input type="checkbox"/>
<b>aSECTION 4– APPROACH AND LANDING PROCEDURES</b>			
		<b>Pass</b>	<b>Fail</b>
<b>a</b>	Aerodrome arrival procedures, altimeter setting, checks and look-out	<input type="checkbox"/>	<input type="checkbox"/>
<b>b</b>	ATC compliance and R/T procedures	<input type="checkbox"/>	<input type="checkbox"/>
<b>c</b>	Go-around action	<input type="checkbox"/>	<input type="checkbox"/>
<b>d</b>	Normal landing	<input type="checkbox"/>	<input type="checkbox"/>
<b>e</b>	Short field landing	<input type="checkbox"/>	<input type="checkbox"/>
<b>f</b>	Post-flight actions	<input type="checkbox"/>	<input type="checkbox"/>
<b>SECTION 5 – APPROACH AND LANDING PROCEDURES</b>			
This section may be combined with sections 1 through 4			
		<b>Pass</b>	<b>Fail</b>
<b>a</b>	Simulated engine failure after take-off (at a safe altitude) and fire drill	<input type="checkbox"/>	<input type="checkbox"/>
<b>b</b>	Equipment malfunctions	<input type="checkbox"/>	<input type="checkbox"/>
<b>c</b>	Forced landing (simulated)	<input type="checkbox"/>	<input type="checkbox"/>
<b>d</b>	ATC compliance and R/T procedures	<input type="checkbox"/>	<input type="checkbox"/>
<b>e</b>	Oral questions	<input type="checkbox"/>	<input type="checkbox"/>
<b>Examiners signature:</b>			

<b>SECTION 6 – RELEVANT TYPE ITEMS</b>			
This section may be combined with sections 1 through 5			
Applicants license number and name:		Pass	Fail
<b>a</b>	Simulated engine failure during take-off (at a safe altitude unless carried out in a FFS)	<input type="checkbox"/>	<input type="checkbox"/>
<b>b</b>	Approach and go-around with failed engine(s)	<input type="checkbox"/>	<input type="checkbox"/>
<b>c</b>	Approach and full stop landing with failed engine(s)	<input type="checkbox"/>	<input type="checkbox"/>
<b>d</b>	Malfunctions in the envelope pressure system	<input type="checkbox"/>	<input type="checkbox"/>
<b>e</b>	As determined by the FE: any relevant items of the type rating skill test to include, if applicable: i. Airship systems; ii. Operation of envelope pressure system.	<input type="checkbox"/>	<input type="checkbox"/>
<b>g</b>	Oral questions	<input type="checkbox"/>	<input type="checkbox"/>
		<b>Examiners signature:</b>	

**APPLICANT'S DECLARATION / IZJAVA KANDIDATA**

I declare that the information provided on this form is correct and I have been informed of the result of the skill test, proficiency check or assessment of competence.

*Izjavljujem kako su podaci na ovom obrascu točni, te kako sam upoznat s rezultatom ispita praktične osposobljenosti, provjere stručnosti ili procjene stručnosti.*

<b>Name</b> <i>Ime</i>		<b>Signature</b> <i>Potpis</i>		<b>Date</b> <i>Datum</i>	
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**EXAMINER SHALL BEFORE TEST / ISPITIVAČ ĆE PRIJE TESTA:**

- (1) ensure that communication with the applicant can be established without language barriers;
- (2) verify that the applicant complies with all the qualification, training and experience requirements in Part-FCL for the issue, revalidation or renewal of the licence, rating or certificate for which the skill test, proficiency check or assessment of competence is taken;
- (3) make the applicant aware of the consequences of providing incomplete, inaccurate or false information related to their training and flight experience.

*(1) osigurati da komunikacija s podnosiocem zahtjeva može biti uspostavljena bez jezičnih prepreka*

*(2) potvrditi da podnositelj zahtjeva ispunjava sve kvalifikacije, zahtjeve osposobljavanja i iskustva Dijela-FCL za stjecanje, produžavanje ili obnavljanje dozvole, ovlaštenja ili certifikata za koji se ispit praktične osposobljenosti, provjera stručnosti ili procjena stručnosti provodi*

*(3) upoznati podnositelja zahtjeva s posljedicama dostavljanja nepotpunih, netočnih ili neistinitih informacija vezano uz njihovo osposobljavanje i letačko iskustvo*

**EXAMINER'S DECLARATION:**

I DECLARE THAT I received information from the applicant regarding his/her experience and instruction, and found that experience and instruction complying with the applicable requirements in Part-FCL.

*IZJAVLJUJEM kako sam primio sve informacije od kandidata vezano za njegovo iskustvo i osposobljavanje, i potvrdio da su iskustvo i osposobljavanje u skladu s primjenjivim zahtjevima Dijela-FCL.*

**EXAMINER'S CONFIRMATION:**

I confirm that all the required manoeuvres and exercises have been completed, and that the applicant's theoretical knowledge has been confirmed by verbal examination (where applicable).

*Potvrđujem kako su svi zahtijevani manevri i vježbe provedeni, te je potvrđeno kandidatovo teorijsko znanje usmenim ispitivanjem (kada je primjenjivo)*

<b>Name</b> <i>Ime</i>		<b>Signature</b> <i>Potpis</i>		<b>Date</b> <i>Datum</i>	
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**ADDITIONAL DECLARATION FOR non-CCAA EXAMINERS / DODATNA IZJAVA ZA non-CCAA ISPITIVAČE**

'I hereby declare that I have reviewed and applied the relevant national procedures and requirements of the applicant's competent authority contained in version \_\_\_\_\_ (insert document version, i.e. 01-2014) of the Examiner Differences Document, as published by EASA.

*Ovim putem izjavljujem kako sam se upoznao i primijenio relevantne nacionalne zahtjeve i procedure tijela nadležnog za izdavanje dozvole podnositelja zahtjeva koje se nalaze u verziji \_\_\_\_\_ (upiši broj verzije dokumenta, npr. 01-2014) Examiners Difference Dokumenta, izdanog od strane EASA-e*

<b>Name</b> <i>Ime</i>		<b>Signature</b> <i>Potpis</i>		<b>Date</b> <i>Datum</i>	
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Examiners remarks from skill test/ proficiency check / assessment of competence:

*Primjedbe i napomene ispitivača s ispita praktične osposobljenosti / provjere stručnosti / procjene stručnosti*