

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:	

SECTION 1 – DEPARTURE					
Use of checklist, airmanship, anti-icing/de-icing, procedures, etc. Apply in all sections					
Applicant's license number or name:		FS/A	Pass	Fail	Examiner's signature
a	Use of flight manual (or equivalent) especially aircraft performance calculation; mass and balance		<input type="checkbox"/>	<input type="checkbox"/>	
b	Use of Air Traffic Services document, weather document		<input type="checkbox"/>	<input type="checkbox"/>	
c	Preparation of ATC flight plan, IFR flight plan/log		<input type="checkbox"/>	<input type="checkbox"/>	
d	Identification of the required nav aids for departure, arrival and approach procedures		<input type="checkbox"/>	<input type="checkbox"/>	
e	Pre-flight inspection		<input type="checkbox"/>	<input type="checkbox"/>	
f	Weather minima		<input type="checkbox"/>	<input type="checkbox"/>	
g	Taxiing/Air taxi in compliance with ATC or instructions of instructor		<input type="checkbox"/>	<input type="checkbox"/>	
h	PBN departure (if applicable): - Check that the correct procedure has been loaded in the navigation system - Cross – check between the navigation system display and the departure chart		<input type="checkbox"/>	<input type="checkbox"/>	
i	Pre-take off briefing, procedures and checks		<input type="checkbox"/>	<input type="checkbox"/>	
j	Transition to instrument flight		<input type="checkbox"/>	<input type="checkbox"/>	
k	Instrument departure procedures, including PBN procedures		<input type="checkbox"/>	<input type="checkbox"/>	
SECTION 2 – GENERAL HANDLING					
a	Control of the helicopter by reference solely to instruments, including:		<input type="checkbox"/>	<input type="checkbox"/>	
b	Climbing and descending turns with sustained Rate 1 turn		<input type="checkbox"/>	<input type="checkbox"/>	
c	Recoveries from unusual attitudes, including sustained 30° turns and steep descending turns		<input type="checkbox"/>	<input type="checkbox"/>	
SECTION 3 – EN-ROUTE IFR PROCEDURES					
a	Tracking, including interception, e.g. NDB, VOR, RNAV		<input type="checkbox"/>	<input type="checkbox"/>	
b	Use of radio aids		<input type="checkbox"/>	<input type="checkbox"/>	
c	Level flight, control of heading, altitude and airspeed, power setting		<input type="checkbox"/>	<input type="checkbox"/>	
d	Altimeter settings		<input type="checkbox"/>	<input type="checkbox"/>	
e	Timing and revision of ETAs		<input type="checkbox"/>	<input type="checkbox"/>	
f	Monitoring of flight progress, flight log, fuel usage, systems management		<input type="checkbox"/>	<input type="checkbox"/>	
g	Ice protection procedures, simulated if necessary and if applicable		<input type="checkbox"/>	<input type="checkbox"/>	
h	ATC liaison - compliance, R/T procedures		<input type="checkbox"/>	<input type="checkbox"/>	

SECTION 3a – ARRIVAL PROCEDURES					
Applicant's license number or name:		FS/A	Pass	Fail	Examiner's signature
a	Setting and checking of navigational aids, if applicable		<input type="checkbox"/>	<input type="checkbox"/>	
b	Arrival procedures, altimeter check		<input type="checkbox"/>	<input type="checkbox"/>	
c	Altitude and speed constraints, if applicable		<input type="checkbox"/>	<input type="checkbox"/>	
d	PBN arrival (if applicable): <ul style="list-style-type: none"> <li>- Check that the correct procedure has been loaded in the navigation system</li> <li>- Cross – check between the navigation system display and the arrival chart</li> </ul>		<input type="checkbox"/>	<input type="checkbox"/>	
SECTION 4 – 3D OPERATIONS (+)					
a	Setting and checking of navigational aids Check Vertical Path angle for RNP APCH: <ul style="list-style-type: none"> <li>- Check that the correct procedure has been loaded in the navigation system</li> <li>- Cross – check between the navigation system display and the arrival chart</li> </ul>		<input type="checkbox"/>	<input type="checkbox"/>	
b	Approach and landing briefing, including descent/approach/landing checks		<input type="checkbox"/>	<input type="checkbox"/>	
c(*)	Holding procedure		<input type="checkbox"/>	<input type="checkbox"/>	
d	Compliance with published approach procedure		<input type="checkbox"/>	<input type="checkbox"/>	
e	Approach timing		<input type="checkbox"/>	<input type="checkbox"/>	
f	Altitude, speed heading control, (stabilised approach)		<input type="checkbox"/>	<input type="checkbox"/>	
g(*)	Go-around action		<input type="checkbox"/>	<input type="checkbox"/>	
h(*)	Missed approach procedure/landing		<input type="checkbox"/>	<input type="checkbox"/>	
i	ATC liaison - compliance, R/T procedures		<input type="checkbox"/>	<input type="checkbox"/>	
SECTION 5 – 2D OPERATIONS (+)					
Applicant's license number or name:		FS/A	Pass	Fail	Examiner's signature
a	Setting and checking of navigational aids For RNP APCH: <ul style="list-style-type: none"> <li>- Check that the correct procedure has been loaded in the navigation system</li> <li>- Cross – check between the navigation system display and the approach chart</li> </ul>		<input type="checkbox"/>	<input type="checkbox"/>	
b	Approach and landing briefing, including descent/approach/landing checks and identification of facilities		<input type="checkbox"/>	<input type="checkbox"/>	
c(*)	Holding procedure		<input type="checkbox"/>	<input type="checkbox"/>	
d	Compliance with published approach procedure		<input type="checkbox"/>	<input type="checkbox"/>	
e	Approach timing		<input type="checkbox"/>	<input type="checkbox"/>	
f	Altitude, speed heading control, (stabilised approach)		<input type="checkbox"/>	<input type="checkbox"/>	
g(*)	Go-around action		<input type="checkbox"/>	<input type="checkbox"/>	
h*)	Missed approach procedure / landing		<input type="checkbox"/>	<input type="checkbox"/>	
i	ATC liaison - compliance, R/T procedures		<input type="checkbox"/>	<input type="checkbox"/>	

**SECTION 6 – ABNORMAL AND EMERGENCY PROCEDURES**

This section may be combined with sections 1 through 5. The test shall have regard to control of the helicopter, identification of the failed engine, immediate actions (touch drills), follow-up actions and checks and flying accuracy, in the following situations:

a	Simulated engine failure after take-off and on/during approach (**)(at a safe altitude unless carried out in FFS, FNPTII/III, FTD 2,3)		<input type="checkbox"/>	<input type="checkbox"/>	
b	Failure of stability augmentation devices/hydraulic system (if applicable)		<input type="checkbox"/>	<input type="checkbox"/>	
c	Limited panel		<input type="checkbox"/>	<input type="checkbox"/>	
d	Autorotation and recovery to a pre-set altitude		<input type="checkbox"/>	<input type="checkbox"/>	
e	3D operations manually without flight director(***) 3D operations manually with flight director(***)		<input type="checkbox"/>	<input type="checkbox"/>	

(+) To establish or maintain PBN privileges one approach in either Section 4 or Section 5 shall be an RNP APCH. Where an RNP APCH is not practicable, it shall be performed in an appropriately equipped FSTD

(\*) May be performed in either section 4 or section 5

(\*\*) Multi-engine helicopter only

(\*\*\*) Only one item to be tested

(+) To establish PBN privileges, one approach in either Section 4 or Section 5 shall be an RNP APCH. Where an RNP APCH is not practicable, it shall be performed in an appropriately equipped FSTD.

**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*