

SKILLTEST AND PROFICIENCY CHECKS ON SAILPLANES/POWERED SAILPLANES incl. TMG

APPLICATION AND REPORT FORM FOR SKILL TESTS AND PROFICIENCY CHECKS ON SAILPLANES OR POWERED SAILPLANES OR TMG IN ACCORDANCE WITH AMC TO COMMISSION REGULATION (EU) NO 1178/2011 OF 3 NOVEMBER 2011

A.

<input type="checkbox"/> Skill test		
<input type="checkbox"/> PC		
<input type="checkbox"/> VFR	<input type="checkbox"/> IMC	<input type="checkbox"/> TMG
<input type="checkbox"/> PIC	<input type="checkbox"/> Sailplane	<input type="checkbox"/> SLG

**B.
To be completed by the examiner**

Date of test
Licence endorsement (SPL/LAPL(S))

**C.
To be completed by the applicant**

Date of birth (yyyy-mm-dd)		State of licence issue		Licence no	
Last name			First and middle names		
Street or box			Country		Telephone
Postal code and city			E-mail address		
Place		Date		Signature of applicant	
Flight time total	Number of flights	TMG	IMC		

**D.
To be completed by Training organisation**

TRAINING COMPLETED AND APPLICATION APPROVED - (If applicable)					
Name of Training organisation			Signature Head of Training		
Date		Name in block letters			
PRACTICAL TRAINING					
Flight time	Dual flight time	Solo flight time	Number of flights	Number of solo flights	IMC flight time

**E.
To be completed by the examiner**

RESULT OF THE TEST			
Final result:	<input type="checkbox"/> Passed	<input type="checkbox"/> Partial pass	<input type="checkbox"/> Failed
Place and date:		Stamp:	
Signature of examiner:			
Examiner certificate No:			

Handlingarna kan skannas som Pdf-fil och mejlas till: certifikat.w3d3@transportstyrelsen.se eller skickas till: Transportstyrelsen 601 73, Norrköping

F.

<p>Before Test/check</p> <p><input type="checkbox"/> Technical training (initial issue only)</p> <p><input type="checkbox"/> Valid SPL/LAPL(S) licence,</p> <p><input type="checkbox"/> Valid Medical Class 1/2</p> <p><input type="checkbox"/> Valid Medical Class LAPL</p> <p>Valid R/T certificate :</p> <p><input type="checkbox"/> Swedish <input type="checkbox"/> English</p> <p><input type="checkbox"/> Personal identification card</p> <p><input type="checkbox"/> Conversion report requested from SSF</p>	<p>All prerequisites checked and confirmed</p> <p>.....</p> <p>(examiner)</p>
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G.

SECTION 1 PRE-FLIGHT OPERATIONS AND DEPARTURE		Instructors initials when training completed	Pass	Fail
Use of checklist, airmanship (control of sailplane by external visual reference etc.) apply in all sections.				
1.a	Pre-flight sailplane (daily) inspection, documentation and weather brief		<input type="checkbox"/>	<input type="checkbox"/>
1.b	Verifying in-limits mass and balance and performance calculation		<input type="checkbox"/>	<input type="checkbox"/>
1.c	Sailplane servicing compliance		<input type="checkbox"/>	<input type="checkbox"/>
1.d	Pre take-off checks		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed		

SECTION 2 (A) LAUNCH METHOD WINCH LAUNCH		Instructors initials when training completed	Pass	Fail
2.a	Signals before and during launch, including messages to winch driver		<input type="checkbox"/>	<input type="checkbox"/>
2.b	Adequate profile of winch launch		<input type="checkbox"/>	<input type="checkbox"/>
2.c	Launch failures (simulated)		<input type="checkbox"/>	<input type="checkbox"/>
2.d	Situational awareness		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed		

Name of applicant.....	Licence no.....
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SECTION 2 (B) LAUNCH METHOD AEROTOW LAUNCH		Instructors initials when training completed	Pass	Fail
2.a	Signals before and during launch, including signals to / communications with towplane pilot for any problems		<input type="checkbox"/>	<input type="checkbox"/>
2.b	Initial roll, takeoff climb		<input type="checkbox"/>	<input type="checkbox"/>
2.c	Launch abandonment (simulation only or 'talkthrough')		<input type="checkbox"/>	<input type="checkbox"/>
2.d	Correct positioning during straight flight and turns		<input type="checkbox"/>	<input type="checkbox"/>
2.e	Out of position and recovery		<input type="checkbox"/>	<input type="checkbox"/>
2.f	Correct release from tow		<input type="checkbox"/>	<input type="checkbox"/>
2.g	Lookout and airmanship through whole launch phase		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed		

SECTION 2 (C) LAUNCH METHOD SELF LAUNCH		Instructors initials when training completed	Pass	Fail
2.a	ATC liaison – compliance		<input type="checkbox"/>	<input type="checkbox"/>
2.b	Aerodrome departure procedures		<input type="checkbox"/>	<input type="checkbox"/>
2.c	Initial roll, takeoff climb		<input type="checkbox"/>	<input type="checkbox"/>
2.d	Lookout and airmanship during the whole takeoff		<input type="checkbox"/>	<input type="checkbox"/>
2.e	Simulated engine failure after take off		<input type="checkbox"/>	<input type="checkbox"/>
2.f	Engine shut down and stowage		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed		

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SECTION 2 (D) LAUNCH METHOD TMG		Instructors initials when training completed	Pass	Fail
2.a	ATC liaison – compliance		<input type="checkbox"/>	<input type="checkbox"/>
2.b	Aerodrome departure procedures		<input type="checkbox"/>	<input type="checkbox"/>
2.c	Initial roll, takeoff climb		<input type="checkbox"/>	<input type="checkbox"/>
2.d	Lookout and airmanship during the whole takeoff		<input type="checkbox"/>	<input type="checkbox"/>
2.e	Simulated engine failure after take off		<input type="checkbox"/>	<input type="checkbox"/>
2.f	Engine shut down and stowage (If applicable)		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed		

SECTION 3 (A) GENERAL AIRWORK		Instructors initials when training completed	Pass	Fail
3.a	Maintain straight and level flight; attitude and speed control		<input type="checkbox"/>	<input type="checkbox"/>
3.b	Coordinated medium (30° bank) turns, look out procedures and collision avoidance		<input type="checkbox"/>	<input type="checkbox"/>
3.c	Turning on to selected headings visually and with use of compass		<input type="checkbox"/>	<input type="checkbox"/>
3.d	Flight at high angle of attack (critically low airspeed)		<input type="checkbox"/>	<input type="checkbox"/>
3.e	Clean stall and recovery		<input type="checkbox"/>	<input type="checkbox"/>
3.f	Spin avoidance and recovery		<input type="checkbox"/>	<input type="checkbox"/>
2.g	Steep (45° bank) turns, look out procedures and collision avoidance		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed		

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During the practical test/check for IMC, the following limits should apply with appropriate allowance for turbulent conditions and the handling qualities and performance of the sailplane used. Artificial horizon or turn and slip instruments should be used as appropriate:				
	Artificial horizon	Turn & Slip		
Straight flight	Heading +/-10°, IAS +/- 10kts	Heading +/-20°, IAS +/- 15kts		
Turning	Angle of bank +/-15°, IAS +/- 10kts	Small deviations in rate of turn with a maximum deviation between ½ & full scale		
Position fixing given: GPS displaying range and bearing to a point	+/- 2NM	+/- 3NM		
SECTION 3 (B) IMC (Skilltest or PC for IMC rating)		Instructors initials when training completed	Pass	Fail
3.a	Straight flight		<input type="checkbox"/>	<input type="checkbox"/>
3.b	Turning		<input type="checkbox"/>	<input type="checkbox"/>
3.c	Achieving and maintaining heading		<input type="checkbox"/>	<input type="checkbox"/>
3.d	Return to straight flight from steeper angle of bank;		<input type="checkbox"/>	<input type="checkbox"/>
3.e	Position fixing using GPS and aeronautical charts		<input type="checkbox"/>	<input type="checkbox"/>
3.f	Position estimating using DR;		<input type="checkbox"/>	<input type="checkbox"/>
2.g	Basic cloud escape manoeuvre/unusual attitude;		<input type="checkbox"/>	<input type="checkbox"/>
2.h	Advanced cloud escape manoeuvre on nominated heading.		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed		

SECTION 4 CIRCUIT, APPROACH AND LANDING PROCEDURES		Instructors initials when training completed	Pass	Fail
4.a	Aerodrome circuit joining procedure		<input type="checkbox"/>	<input type="checkbox"/>
4.b	Collision avoidance look out procedures		<input type="checkbox"/>	<input type="checkbox"/>
4.c	Pre landing checks		<input type="checkbox"/>	<input type="checkbox"/>
4.d	Circuit, approach control, landing		<input type="checkbox"/>	<input type="checkbox"/>
4.e	Precision landing (simulation of outlanding short field)		<input type="checkbox"/>	<input type="checkbox"/>
4.f	Cross wind landing if suitable conditions available		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed		

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H.

Details of the flight		
Registration a/c	Block on (TMG)	On ground
Departure aerodrome	Block off (TMG)	Take-off
Destination aerodrome	Total block(TMG)	Total
Aircraft type	Number of flights	PIC

I.

REMARKS		
Item no	Comment	
Debriefing/taken part of comments above	Date	Signature of applicant

J.

ADDITIONAL INFORMATION REGARDING THE TEST/PC

Name of applicant.....

Licence no.....

Instructions for completing form

**L 1894- SKILLTEST AND PROFICIENCY CHECKS ON, SAILPLANES/POWERED SAILPLANES
incl. TMG**

- A. Please tick the appropriate boxes.
- B. Please enter the complete information. "Licence endorsement" means the relevant class of aeroplane according to EASA Class and Type Rating List/Licence Endorsement list (Aeroplanes) or relevant category
- C. Personal information of the applicant
- D. This section is to be completed by the Head of Training of the Training organisation.
- E. The result of the test.
- F. This section is a checklist of prerequisites for the examiner to check before the test/check. **Please note that the examiner must sign and thus affirm that he has checked all prerequisites before the test.**
- G. Protocol
- H. Please enter the relevant details of the flight.
- I. Remarks and comments regarding tested items, please indicate the item commented. The applicant signs that he/she has taken part of the result of the test. (It is not a formal acceptance of the result).
- J. Please enter any other relevant information regarding the test. E.g. the test was completed during separate days.

Name of applicant.....	Licence no.....
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