

# PPL AEROPLANE

APPLICATION AND REPORT FORM FOR THE PPL(A) SKILL TEST ON SINGLE-ENGINE OR MULTI-ENGINE AEROPLANES ACCORDING TO AMC1, FCL.235 TO COMMISSION REGULATION (EU) NO 1178/2011 OF 3 NOVEMBER 2011

**A.** Not pertinent for this form

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

Date of test	
Licence endorsement (type or class of aircraft)	

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

Date of birth (yyyy-mm-dd)		State of licence issue		Licence/Student permit no	
Last name			First and middle names		
Street or box			Country		Telephone
Postal code and city			E-mail address		
Place		Date		Signature of applicant	

**Non-Swedish citizens only!**

Records from the registry of suspicion and previous convictions in English in original from the police authority in the country where the applicant holds citizenship. Ref. to the regulations in Aviation Act 11 § LFS 2008:32.

*I och med undertecknandet av denna ansökan överläter den sökande till Transportstyrelsen att för dennes räkning begära utdrag ur Rikspolisstyrelsens misstanke och belastningsregister med referens till bestämmelserna i 11 § LFS 2008:32.*

**D.**  
**To be completed by ATO**

TRAINING COMPLETED AND APPLICATION APPROVED					
Name of ATO			Signature Head of Training or responsible for training		
Date		Name in block letters			
Practical training during course					
Flight time	Dual	Solo flight	Night Flight	Cross country	Cross country solo flight
Crediting of flight time (According to PART FCL.210.A) specify					
Category		Total time		Instrument ground time BITD/FNPT/FTD	

**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
RT-examination passed class	<input type="checkbox"/> Swedish		<input type="checkbox"/> English
Temporary licence issued	<input type="checkbox"/>		
	Temporary licence not issued <input type="checkbox"/>		
Place and date:		Stamp	
Examiner's certificate number:			
Signature of examiner:			

Handlingarna kan skannas som Pdf-fil och mejlas till: [certifikat.w3d3@transportstyrelsen.se](mailto:certifikat.w3d3@transportstyrelsen.se) eller skickas till: Transportstyrelsen, SE-601 73 Norrköping  
Webbsida: [www.transportstyrelsen.se](http://www.transportstyrelsen.se)

<b>Before Test</b>	
<input type="checkbox"/> Technical type course performed <input type="checkbox"/> PPL written test passed Radio telephonist certificate <input type="checkbox"/> Swedish <input type="checkbox"/> English <input type="checkbox"/> Valid language proficiency <input type="checkbox"/> Valid medical certificate class 2	<input type="checkbox"/> Single engine <input type="checkbox"/> Multi engine (min 70 hours PIC) <input type="checkbox"/> Solo flight permit <input type="checkbox"/> Personal identification card I hereby declare that I have read the information according to FCL.1015 c, and checked all prerequisites for this test Sign (examiner).....

\* ) = some of these items may be combined at the discretion of the Flight Examiner.

<b>G.</b>	<b>SECTION 1 PRE-FLIGHT OPERATIONS AND DEPARTURE</b>		Instructors initials when training completed	Pass	Fail
	Use of checklist, airmanship (control of aeroplane by external visual reference, anti/de-icing procedures, etc.) apply in all sections.				
1.a	Pre-flight documentation, weather briefing and NOTAM		<input type="checkbox"/>	<input type="checkbox"/>	
1.b	Mass and balance and performance calculations		<input type="checkbox"/>	<input type="checkbox"/>	
1.c	Aeroplane Inspection and servicing		<input type="checkbox"/>	<input type="checkbox"/>	
1.d	Engine starting and after starting procedures.		<input type="checkbox"/>	<input type="checkbox"/>	
1.e	Taxiing and aerodrome procedures, pre-take off procedures		<input type="checkbox"/>	<input type="checkbox"/>	
1.F	Take-off and after take-off checks		<input type="checkbox"/>	<input type="checkbox"/>	
1.g	Aerodrome departure procedures		<input type="checkbox"/>	<input type="checkbox"/>	
1.h	ATC liaison – compliance R/T procedures		<input type="checkbox"/>	<input type="checkbox"/>	
			Examiners initials when test section is completed .....		

<b>SECTION 2 GENERAL AIRWORK</b>		Instructors initials when training completed	Pass	Fail
2.a	ATC liaison – compliance, R/T-procedures		<input type="checkbox"/>	<input type="checkbox"/>
2.b	Straight and level flight, with speed changes		<input type="checkbox"/>	<input type="checkbox"/>
2.c	Climbing:			
	i. Best rate of climb		<input type="checkbox"/>	<input type="checkbox"/>
	ii. Climbing turns		<input type="checkbox"/>	<input type="checkbox"/>
	iii. Levelling off		<input type="checkbox"/>	<input type="checkbox"/>
2.d	Medium (30° bank) turns		<input type="checkbox"/>	<input type="checkbox"/>
2.e	Steep (45° bank) turns (including recognition and recovery from a spiral dive)		<input type="checkbox"/>	<input type="checkbox"/>

Name of applicant.....

Licence no.....

<b>SECTION 2 GENERAL AIRWORK</b>		Instructors initials when training completed	Pass	Fail
2.F	Flight at critically low airspeed with and without flaps		<input type="checkbox"/>	<input type="checkbox"/>
2.g	Stalling: i. Clean stall and recover with power ii. Approach to stall descending turn with bank angle 20°, approach configuration iii. Approach to stall in landing configuration		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2.h	Descending: i. With and without power ii. Descending turns (steep gliding turns) iii. Levelling off		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		Examiners initials when test section is completed .....		

<b>SECTION 3 EN-ROUTE PROCEDURES</b>		Instructors initials when training completed	Pass	Fail
3.a	Flight plan, dead reckoning and map reading		<input type="checkbox"/>	<input type="checkbox"/>
3.b	Maintenance of altitude, heading and speed		<input type="checkbox"/>	<input type="checkbox"/>
3.c	Orientation, timing and revision of ETAs, log keeping		<input type="checkbox"/>	<input type="checkbox"/>
3.d	Diversion to alternate aerodrome (planning and implementation)		<input type="checkbox"/>	<input type="checkbox"/>
3.e	Use of radio navigation aids		<input type="checkbox"/>	<input type="checkbox"/>
3.f	Basic instrument flying check (180° turn in simulated IMC)		<input type="checkbox"/>	<input type="checkbox"/>
3.g	Flight management (checks, fuel systems and carburettor icing, etc.)		<input type="checkbox"/>	<input type="checkbox"/>
3.h	ATC liaison – compliance, R/T procedures		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed .....		

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<b>SECTION 4 APPROACH AND LANDING PROCEDURES</b>		Instructors initials when training completed	Pass	Fail
4.a	Aerodrome arrival procedures		<input type="checkbox"/>	<input type="checkbox"/>
4.b	* Precision landing (short field landing), cross wind, if suitable conditions available		<input type="checkbox"/>	<input type="checkbox"/>
4.c	* Flapless landing.		<input type="checkbox"/>	<input type="checkbox"/>
4.d	* Approach to landing with idle power (SINGLE ENGINE ONLY)		<input type="checkbox"/>	<input type="checkbox"/>
4.e	Touch and go		<input type="checkbox"/>	<input type="checkbox"/>
4.f	Go-around from low height		<input type="checkbox"/>	<input type="checkbox"/>
4.g	ATC liaison – compliance, R/T procedures		<input type="checkbox"/>	<input type="checkbox"/>
4.f	Actions after flight		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed .....		

<b>SECTION 5 ABNORMAL AND EMERGENCY PROCEDURES</b>		Instructors initials when training completed	Pass	Fail
This section may be combined with Sections 1 through 4.				
5a	Simulated engine failure after take-off (SINGLE-ENGINE ONLY)		<input type="checkbox"/>	<input type="checkbox"/>
5.b	* Simulated forced landing (SINGLE-ENGINE ONLY)		<input type="checkbox"/>	<input type="checkbox"/>
5.c	Simulated precautionary landing (SINGLE-ENGINE ONLY)		<input type="checkbox"/>	<input type="checkbox"/>
5.d	Simulated emergencies		<input type="checkbox"/>	<input type="checkbox"/>
5.e	Oral questions		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed .....		

Name of applicant.....	Licence no.....
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<b>SECTION 6 SIMULATED ASYMMETRIC FLIGHT AND RELEVANT CLASS/TYPE ITEMS</b>		Instructors initials when training completed	Pass	Fail
This section may be combined with Sections 1 through 5.				
6.a	Simulated engine failure during take-off (at a safe altitude unless carried out in a flight simulator)		<input type="checkbox"/>	<input type="checkbox"/>
6.b	Asymmetric approach and go-around		<input type="checkbox"/>	<input type="checkbox"/>
6.c	Asymmetric approach and full stop landing		<input type="checkbox"/>	<input type="checkbox"/>
6.d	Engine shutdown and restart		<input type="checkbox"/>	<input type="checkbox"/>
6.e	ATC liaison – compliance, R/T procedures, Airmanship		<input type="checkbox"/>	<input type="checkbox"/>
6.f	As determined by the Flight Examiner – any relevant items of the class/type rating skill test to include, if applicable: i. Aeroplane systems including handling of auto pilot  ii. Operation of pressurisation system  iii. Use of de-icing and anti-icing system		<input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>	<input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>
6.g	Oral questions		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed .....		

Name of applicant.....

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H.

**DETAILS OF THE FLIGHT**

Registration of a/c	Block on	On ground
Departure aerodrome	Block off	Take-off
Destination aerodrome	Total block	Total flight time
Type of aircraft	Pilot in command	

I.

**REMARKS**

Item no	Comment

J.

**ADDITIONAL INFORMATION REGARDING THE TEST**

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K.

**DE-BRIEFING**

Debriefing/Taken part of comments above	Date	Signature of applicant
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Name of applicant.....

Licence no.....

## Instructions for completing form

### TSL7566 - PPL(A)

- A.** Not pertinent for this form
- 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).
- C.** Personal information of the applicant.
- D.** This section is to be completed by the Head of Training of the ATO.
- 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.  
\*) = some of these items may be combined at the discretion of the Flight Examiner.
- H.** 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.** Additional information regarding the conditions during test, simulators etc.
- K.** Not pertinent for this form.

Name of applicant.....

Licence no.....