



**Application for the conversion of a national Swiss licence to a Part-SFCL licence - SPL**

**Applicant's Swiss licence number**

**Applicant** : Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_ Place of origin: \_\_\_\_\_ Nationality: \_\_\_\_\_

Address: Street/box: \_\_\_\_\_

Postal code: \_\_\_\_\_ City: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

**Summary of conditions for conversion of a national Sailplane pilot licence to a Part-SFCL SPL. Requirements:**

- Valid medical certificate Part-MED class 2 or LAPL (enclose copy of the valid medical);
- Theoretical examination 090 communication;
- Demonstrate knowledge of the relevant parts of EASA Part-SFCL;
- FOCA form 62.040 (Segelflug Erneuerungsgesuch) or a valid national licence;
- Copy of passport.

**Demonstrate knowledge of the relevant parts of EASA Part-SFCL.**

**Confirmation by flight school:**

Flight school name: \_\_\_\_\_ Registration no: \_\_\_\_\_

Name of instructor: \_\_\_\_\_ Licence no: \_\_\_\_\_

Location & date: \_\_\_\_\_ Signature of flight instructor: \_\_\_\_\_

**To be completed by the applicant:**

By signing this form, I declare that:

- I do not possess a pilot licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another EASA Member State.
- I have not applied for a pilot licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another EASA Member State.
- I have never possessed any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another EASA Member State, which was revoked or suspended in any other EASA Member State.
- The information provided is correct. I am aware of the consequences of providing false information, such as being denied a licence, certificate, rating, authorisation or attestation, or having it revoked or cancelled.

Date and place \_\_\_\_\_ Signature of applicant: \_\_\_\_\_