

Federal Department of the Environment, Transport, Energy and Communications DETEC Federal Office of Civil Aviation FOCA Safety - Division Flight Personnel 3003 Bern

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Delegation has to be obtained from FOCA prior to the conduct of the ATPL Skill Test

Applicant:			Examiner:				
Last Name	First Name :			Last Name			First Name :
Date of Birth Lic		Licence Nr:		Exam	Examiner Certificate Nr:		Licence Nr:
Aircraft type:		Simulator ID Nr/ Reg.Nr:		Planned date and place for the skill test:			
	I				I		
ATPL(H) Details o	f condition	s, instruction	and flying ex	perience	before skill	test	
Flight experience:	Total MNI	M 1000 HR	A/C MNM 9	00 HR	FSTD	FNPT	MAX 100 HR in FSTD of which MAX 25 HR in FNPT
MP helicopter:	Total MNI	M 350 HR					
PIC/PICUS:	Total		PIC		PICUS	MNM 100 HR PIC + MNM 150 HR PICUS or MNM 250 HR PICUS (ATPL(H) will be limited to	
						MP OPS only) or MNM 250 HR PIC	
Cross Country:	Total MNI	M 200 HR	PIC		PICUS	PIC or PICUS MNM 100 HR	
Instrument Time:	nt Time Total MNM 100 HR		FSTD MAX 10 HR				
morament rine.							
Night Flight Time as PIC or co-pilot:							
same category I have not appli the same categ I have never po scope and in th any other EASA the information	ogbook pa ner certificator approves s a pilot lici issued in a ed for a pi ory issued issessed a e same ca A Member provided i	ages (A/C and ate & licence val certificate cence, certificate another EAS illot licence, cd in another Eany personne ategory issue State.	d Simulator) (not applicate (not applicate cate, rating, a A Member St ertificate, rati EASA Membe el licence, cer d in another m aware of th	nuthorisati nate. ng, autho er State. tificate, ra EASA Me	iss simulation or attest risation or ating, authoriber Stat quences of	etation wit attestation prisation of which w	h the same scope and in the n with the same scope and in or attestation with the same as revoked or suspended in false information, such as t revoked or cancelled.
Signature of applic	ant			Date ar	nd place:		

The request has to be sent at least 2 weeks before the expected date of the skill test to pel-qc@bazl.admin.ch