



**Instructor (S)  
Assessment of Competence  
/ Demonstration of Ability**

Application & report form

Applicant's Licence Nr.

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

Private address: Street: \_\_\_\_\_

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

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

<b>Assessment of Competence</b>	<input type="checkbox"/> Initial	<input type="checkbox"/> Extension of privileges acc. SFCL.315 _____	
	<input type="checkbox"/> Recency acc.SFCL.360(a)(2)*	<small>*) If the FI(S) certificate holder has failed to complete the flight in accordance with paragraph SFCL.360(a)(2), he or she shall not exercise the privileges of the FI(S) certificate until he or she has successfully completed an assessment of competence in accordance with point SFCL.345</small>	

**Only in case of an assessment after training in an ATO / DTO**

ATO/ DTO name: \_\_\_\_\_ Registration nr.: \_\_\_\_\_

Name of Head of Training: \_\_\_\_\_ Licence nr.: \_\_\_\_\_

Location & date: \_\_\_\_\_ Signature of Head of Training: \_\_\_\_\_

**To be completed by examiner / nominated FI(S):**

<b>Details of flight</b>						
<input type="checkbox"/> Aero tow launch	<input type="checkbox"/> Winch launch	<input type="checkbox"/> Self-launch	<input type="checkbox"/> _____			
Date: _____		Type of aeroplane: _____		Registration: _____		
Departure: _____	Destination: _____	Block-off: _____	Block-on: _____	Block time: _____	# of landings: _____	
_____	_____	_____	_____	_____	_____	

<b>Result:</b>	<input type="checkbox"/> passed	<input type="checkbox"/> failed (see last page)	<b>Signature of applicant:</b>
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Remarks:

*I confirm that the test/check has been carried out in full compliance with the provisions of SFCL.405 and SFCL.410(a), or SFCL.360(a)(2)*

Examiner / nominated FI(S) first and last name: \_\_\_\_\_

Examiner / nominated FI(S) licence Nr.: \_\_\_\_\_

Foreign Examiner / nominated FI(S) certificate Nr.: \_\_\_\_\_

Date and place: \_\_\_\_\_

Signature of Examiner / nominated FI(S): \_\_\_\_\_

*ADMINISTRATIVE INFORMATION – FOR FOCA ONLY*



Licence Nr.

Section 1a		Long briefing		
		passed	failed	
a	Construction and structure of lesson			
b	Instructional technique and method			
c	Technical knowledge			
d	Use of models and aids			
e	Clarity of explanation and speech			
f	Student participation			
please select as necessary		<b>passed</b>	<b>failed</b>	Signature of examiner / nominated FI(S)

Section 1b		Theoretical knowledge oral		
		passed	failed	
a.	Air law			
b.	Aircraft General Knowledge			
c.	Flight Performance and Planning			
d.	Human Performance and Limitations			
e.	Meteorology			
f.	Navigation			
g.	Operational Procedures			
h.	Principles of Flight			
i.	Training Administration			
please select as necessary		<b>passed</b>	<b>failed</b>	Signature of examiner / nominated FI(S)

Section 2		Pre-flight briefing		
		passed	failed	
a.	Visual presentation			
b.	Technical accuracy			
c.	Clarity of explanation			
d.	Clarity of speech			
e.	Instructional technique			
f.	Use of models and aids			
g.	Student participation			
please select as necessary		<b>passed</b>	<b>failed</b>	Signature of examiner / nominated FI(S)

Section 3		Instruction flight		
		passed	failed	
a.	Arrangement of demonstration			
b.	Synchronisation of speech with demonstration			
c.	Correction of faults			
d.	Aircraft handling			
e.	Instructional technique			
f.	General airmanship and safety			
g.	Positioning and use of airspace			
please select as necessary		<b>passed</b>	<b>failed</b>	Signature of examiner / nominated FI(S)



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Section 4 (if applicable)		Instructor seat qualification or other exercises		
		passed	failed	
a.	Pre-flight			
b.	Departure			
c.	Enroute			
d.	Air works			
e.	Approach			
f.	Landings			
g.	General			
please select as necessary		<b>passed</b>	<b>failed</b>	Signature of examiner / nominated FI(S)

Section 5		Post flight briefing		
		passed	failed	
a.	Visual presentation			
b.	Technical accuracy			
c.	Clarity of explanation			
d.	Clarity of speech			
e.	Instructional technique			
f.	Use of models and aids			
g.	Student participation			
please select as necessary		<b>passed</b>	<b>failed</b>	Signature of examiner / nominated FI(S)

**In case of flight according SFCL.360(a)(2) this form has to be sent and stored to/by the respective ATO/DTO.**



Licence Nr.

**This page has to be completed and signed by examiner / nominated FI(S) and applicant if assessment of competence failed.**

Failed item:	Remarks:	
<b>Details of the failed assessment of competence:</b>		
Date and Place	Signature of applicant	Signature of examiner/ nominated FI(S)

**Hinweis:**  
 Innett 10 Tagen nach Zustellung des Ergebnisses vom Skill Test/Proficiency Check kann beim Bundesamt für Zivilluftfahrt, 3003 Bern, schriftlich die Ausstellung einer beschwerdefähigen Verfügung über das Prüfungsresultat verlangt werden.

**Remarque:**  
 Il est possible, dans les dix jours suivant la communication du résultat du Skill Test/Proficiency Check d'obtenir, sur requête écrite auprès de l'Office fédéral de l'aviation civile, 3003 Berne, une décision susceptible de recours portant sur le résultat dudit examen.

**Avviso:**  
 Entro dieci giorni dall'invio dei risultati dello Skill Test/Proficiency Check può essere richiesta per iscritto all'Ufficio federale dell'aviazione civile, 3003 Berna, una decisione impugnabile sull'esito dell'esame.

**Remark:**  
 Within 10 days after receipt of this skill test/proficiency check result, an appealable decision about the test / check results may be requested in writing to the Federal Office of Civil Aviation, 3003 Bern, using one of the official languages (German/French/Italian)