



**Application for conversion of a national
Swiss licence to a Part-FCL licence**

Applicant's Swiss licence number:

SPA single pilot aeroplane

- RPPL(A) to LAPL(A)**
- PPL(A) ICAO**
- CPL(A) ICAO**

Applicant last name: _____ first name: _____ date of birth: _____

place of birth: _____ place of origin: _____ nationality: _____

private address: post code: _____ city: _____ street: _____

phone/fax home: _____ phone/fax office: _____

e-mail: _____

invoice applicant company _____

General flight experience report

Copies of the relevant logbook pages (flight experience & STD pages) must be attached to this form.

Summary of conditions and flying experience for conversion of a national RPPL(A) to a Part-FCL LAPL(A).

Flying hours experience and further EASA requirements for:

LAPL(A)

a) Part-MED medical LAPL, issued by an authorised Swiss FOCA AME (enclose copy of valid medical certificate)

b) Demonstrate knowledge of the relevant parts of EASA Part-FCL **(must be confirmed on page 4)**

c) Total flying experience on aeroplanes hours: _____

d) Recency requirements acc. Part-FCL.140.A:

(enclose the relevant copies of the flight book or the proficiency check)

within the last 24 months: 12 hours of flight time as PIC hours: _____

12 take-offs and landings ldgs: _____

refresher training of at least

1 hour with an instructor date: _____

if not complying with the requirements above:

pass a proficiency check date: _____

or perform the additional flight time or

take-offs and landings under the supervision of an instructor

date: _____

name of instructor: _____

licence no: _____

signature of instructor: _____

e) Radionavigation acc. AMC1 FCL.110.A, exercise 18c

f) Radiotelephony UIT or National

g) Language Proficiency in accordance with FCL.055

Applicant's Swiss licence number:

Summary of conditions and flying experience for conversion of a national PPL(A) to a Part-FCL PPL(A) without IR.

Flying hours experience and further EASA requirements for:

PPL(A) (VFR only)

- a) Part-MED medical 2, issued by an authorised Swiss FOCA AME (enclose copy of valid medical certificate)
- b) Demonstrate knowledge of the relevant parts of EASA Part-FCL **(must be confirmed on page 4)**
- c) Minimum total flying experience on aeroplanes of 70 hours hours: _____
- d) Radionavigation
- e) Radiotelephony UIT or National
- f) Language Proficiency in accordance with FCL.055

Summary of conditions and flying experience for conversion of a national PPL(A) to a Part-FCL PPL(A) with IR.

Flying hours experience and further EASA requirements for:

PPL/IR(A)

- a) Part-MED medical 2 with IR issued by an authorised Swiss FOCA AME (enclose copy of valid medical certificate)
- b) Demonstrate knowledge of the relevant parts of EASA Part-FCL **(must be confirmed on page 4)**
- c) Minimum total flying experience in accordance with IR on aeroplanes of 75 hours hours: _____
- d) Night qualification entry in national licence (if applicable)
or
 IFR by day only
- e) Language Proficiency in accordance with FCL.055
- f) Knowledge of flight performance and planning as required by FCL.615(b)

Applicant's Swiss licence number:

**Summary of conditions and flying experience for conversion of a national CPL(A) to a Part-FCL CPL(A)
(VFR only).**

Flying hours experience and further EASA requirements for:

**CPL SPA (VFR only) more than 500 HR as PIC
(restricted to type / class SPA)**

- a) Part-MED medical 1 issued by an authorised Swiss FOCA AME
(enclose copy of valid medical certificate)
- b) Demonstrate knowledge of the relevant parts of EASA Part-FCL **(must be confirmed on page 4)**
- c) Minimum total flying experience as PIC on SPA of 500 hours hours: _____
- d) Night qualification entry in national licence (if applicable)
- e) Proficiency check on SP aeroplane in accordance with FCL.740.A
- f) Language Proficiency in accordance with FCL.055

**CPL SPA (VFR only) below 500 HR as PIC
(restricted to type / class SPA)**

- a) Part-MED medical 1 issued by an authorised Swiss FOCA AME
(enclose copy of valid medical certificate)
- b) Demonstrate knowledge of the relevant parts of EASA Part-FCL **(must be confirmed on page 4)**
- c) Knowledge of flight performance and planning
as required by FCL.310
- d) Night qualification entry in national licence (if applicable)
- e) Proficiency check on SP aeroplane in accordance with FCL.740.A
- f) Language Proficiency in accordance with FCL.055

Applicant's Swiss licence number:

Summary of conditions and flying experience for conversion of a national CPL(A) to a Part-FCL CPL(A) with IR.

Flying hours experience and further EASA requirements for:

CPL/IR SPA **more than 500 HR as PIC**
(restricted to type / class SPA)

- a) Part-MED medical 1 with IR issued by an authorised Swiss FOCA AME
(enclose copy of valid medical certificate)
- b) Demonstrate knowledge of the relevant parts of EASA Part-FCL **(must be confirmed below)**
- c) Minimum total flying experience as PIC on SPA of 500 hours hours: _____
- d) Night qualification in national licence
- e) Language Proficiency in accordance with FCL.055
- f) Proficiency check on SP aeroplane in accordance with FCL.740.A

CPL/IR SPA **below 500 HR as PIC**
(restricted to type / class SPA)

- a) Part-MED medical 1 with IR issued by an authorised Swiss FOCA AME
(enclose copy of valid medical certificate)
- b) Demonstrate knowledge of the relevant parts of EASA Part-FCL **(must be confirmed below)**
- c) Night qualification in national licence
- d) Knowledge of flight planning and flight performance
for CPL/IR level
- e) Language Proficiency in accordance with FCL.055
- f) Proficiency check on SPA in accordance with FCL.704.A

By signing this form, I declare:

- a) I know the relevant parts of EASA Part-FCL ¹⁾
- b) 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.
- c) 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.
- d) 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.
- e) that the information provided are correct. I am aware of the consequences of providing false information, such as being denied a license, certificate, rating, authorisation or attestation, or having it revoked or cancelled

name: _____ signature of applicant: _____

date and place: _____

¹⁾ The relevant parts of EASA Part-FCL are available on: www.bazl.admin.ch/licences