

SPL/LAPL(S)

Sailplane/powered sailplane

APPLICATION AND REPORT FORM FOR THE SPL/LAPL(S) SKILL
TEST ON SAILPLANES 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 (SPL or LAPL(S))	

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!					
<input type="checkbox"/> Records from the registry of suspicion and previous convictions in English <u>in original</u> 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 Training
organisation**

TRAINING COMPLETED AND APPLICATION APPROVED					
Name of Training organisation			Signature Head of Training or responsible for training		
Date		Name in block letters			
Practical training during course					
Flight time	Dual flight time	Solo flight time	Number of flights	Number of solo flights	XC flight
Crediting of flight time (According to PART FCL.210.A) specify					
Category		Total time			

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
Place and date:		Stamp	
Examiner's certificate number:			
Signature of examiner:			

Handlingarna kan skannas som Pdf-fil och mejlas till: certifikat.w3d3@transportstyrelsen.se eller skickas till: Transportstyrelsen 601 73, Norrköping

F.

Before Test	
<input type="checkbox"/> Technical type course performed <input type="checkbox"/> SPL/LAPL(S) written test passed Radio telephonist certificate <input type="checkbox"/> Swedish <input type="checkbox"/> English <input type="checkbox"/> Valid language proficiency (Not mandatory) <input type="checkbox"/> Valid medical certificate class 2 or 1 <input type="checkbox"/> Valid medical certificate LAPL	<input type="checkbox"/> Solo flight permit <input type="checkbox"/> XC flight 100 km or 50 km solo (valid after april 2018) <input type="checkbox"/> Personal identification card <input type="checkbox"/> Conversion report requested from SSF <hr/> All prerequisites checked and confirmed Sign (examiner).....

G.

SECTION 1 PRE-FLIGHT OPERATIONS AND DEPARTURE		Instructors initials when training completed	Pass	Fail
Use of checklist, airmanship (control of sailplane by external visual reference etc.) apply in all sections.				
1.a	Pre-flight sailplane (daily) inspection, documentation and weather brief		<input type="checkbox"/>	<input type="checkbox"/>
1.b	Verifying in-limits mass and balance and performance calculation		<input type="checkbox"/>	<input type="checkbox"/>
1.c	Sailplane servicing compliance		<input type="checkbox"/>	<input type="checkbox"/>
1.d	Pre take-off checks		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed		

SECTION 2 (A) LAUNCH METHOD WINCH LAUNCH		Instructors initials when training completed	Pass	Fail
2.a	Signals before and during launch, including messages to winch driver		<input type="checkbox"/>	<input type="checkbox"/>
2.b	Adequate profile of winch launch		<input type="checkbox"/>	<input type="checkbox"/>
2.c	Launch failures (simulated)		<input type="checkbox"/>	<input type="checkbox"/>
2.d	Situational awareness		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed		

Name of applicant.....

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SECTION 2 (B) LAUNCH METHOD AEROTOW LAUNCH		Instructors initials when training completed	Pass	Fail
2.a	Signals before and during launch, including signals to / communications with towplane pilot for any problems		<input type="checkbox"/>	<input type="checkbox"/>
2.b	Initial roll, takeoff climb		<input type="checkbox"/>	<input type="checkbox"/>
2.c	Launch abandonment (simulation only or 'talkthrough')		<input type="checkbox"/>	<input type="checkbox"/>
2.d	Correct positioning during straight flight and turns		<input type="checkbox"/>	<input type="checkbox"/>
2.e	Out of position and recovery		<input type="checkbox"/>	<input type="checkbox"/>
2.f	Correct release from tow		<input type="checkbox"/>	<input type="checkbox"/>
2.g	Lookout and airmanship through whole launch phase		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed		

SECTION 2 (C) LAUNCH METHOD SELF LAUNCH		Instructors initials when training completed	Pass	Fail
2.a	ATC liaison – compliance		<input type="checkbox"/>	<input type="checkbox"/>
2.b	Aerodrome departure procedures		<input type="checkbox"/>	<input type="checkbox"/>
2.c	Initial roll, takeoff climb		<input type="checkbox"/>	<input type="checkbox"/>
2.d	Lookout and airmanship during the whole takeoff		<input type="checkbox"/>	<input type="checkbox"/>
2.e	Simulated engine failure after take off		<input type="checkbox"/>	<input type="checkbox"/>
2.f	Engine shut down and stowage		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed		

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SECTION 3 GENERAL AIRWORK		Instructors initials when training completed	Pass	Fail
3.a	Maintain straight and level flight; attitude and speed control		<input type="checkbox"/>	<input type="checkbox"/>
3.b	Coordinated medium (30° bank) turns, look out procedures and collision avoidance		<input type="checkbox"/>	<input type="checkbox"/>
3.c	Turning on to selected headings visually and with use of compass		<input type="checkbox"/>	<input type="checkbox"/>
3.d	Flight at high angle of attack (critically low airspeed)		<input type="checkbox"/>	<input type="checkbox"/>
3.e	Clean stall and recovery		<input type="checkbox"/>	<input type="checkbox"/>
3.f	Spin avoidance and recovery		<input type="checkbox"/>	<input type="checkbox"/>
3.g	Steep (45° bank) turns, look out procedures and collision avoidance		<input type="checkbox"/>	<input type="checkbox"/>
3.h	Local area navigation and awareness		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed		

SECTION 4 CIRCUIT, APPROACH AND LANDING PROCEDURES		Instructors initials when training completed	Pass	Fail
4.a	Aerodrome circuit joining procedure		<input type="checkbox"/>	<input type="checkbox"/>
4.b	Collision avoidance look out procedures		<input type="checkbox"/>	<input type="checkbox"/>
4.c	Pre landing checks		<input type="checkbox"/>	<input type="checkbox"/>
4.d	Circuit, approach control, landing		<input type="checkbox"/>	<input type="checkbox"/>
4.e	Precision landing (simulation of outlanding short field)		<input type="checkbox"/>	<input type="checkbox"/>
4.f	Cross wind landing if suitable conditions available		<input type="checkbox"/>	<input type="checkbox"/>
		Examiners initials when test section is completed		

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DETAILS OF THE FLIGHT			
H.	Registration of sailplane	Number of flights	Total flight time
Aerodrome			
Type of sailplane		Pilot in command (FE)	

REMARKS		
I.	Item no	Comment

J.	ADDITIONAL INFORMATION REGARDING THE TEST

DE-BRIEFING			
K.	Debriefing/Taken part of comments above	Date	Signature of applicant

Instructions for completing form

Name of applicant.....	Licence no.....
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L 1895 – SPL/LAPL(S)

- A. Not pertinent for this form
- B. Please enter the complete information.
- C. Personal information of the applicant.
- D. This section is to be completed by the Head of Training of the training organisation.
- 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.
- 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, E.g. the test was completed during separate days.
- K. The applicant signs that he/she has taken part of the result of the test. (It is not a formal acceptance of the result).

Name of applicant.....

Licence no.....