## Valsts aģentūra "Civilās aviācijas aģentūra" State Agency "Civil Aviation Agency" of the Republic of Latvia

10 Biroju street, Airport "Rīga", Mārupe county, LV-1053, Latvia Phone +371 67830936, fax +371 67830967 caa@caa.gov.lv, www.caa.gov.lv

APPLICATION AND R			(according to AMC	1 of Appendix 7	)		
Applicant's last name	e(s):						
Applicant's first name	e(s):						
Signature of applican	ıt:						IR: H 🗌
Type of licence*:							IK. 11 🗀
Licence number*:							
State:							
1. Details of the fl	ight				T	_	
Group, type of aircraf	ft:			ı	Registration:		
Aerodrome or site:	e or site: Take-off time:		Landing time: F		Flight time:		
				Tot	al flight time:		
2. Result of the te	st			100	ai iligili tilile.		
Skill test details:							
Pass		Fa	ail 🗌		Partial p	ass 🗌	
3. Remarks							
Location and date:							
Examiner's certificate	numb	er*:		Type and nu	ımber of licen	ce:	
Signature of examine	r:			Name(s) in	capital letters:		

<sup>\*</sup> if applicable

Circle **O** when item passed Cross **X** when item failed

Applicant's first,	last name(s):	

SECTIO	N 1 – DEPARTURE
Use of c	hecklist, airmanship, anti-icing/de-icing procedures, etc., apply in all sections
а	Use of flight manual (or equivalent) especially a/c performance calculation, mass and balance
b	Use of Air Traffic Services document, weather document
С	Preparation of ATC flight plan, IFR flight plan/log
d	Identification of the required navaids for departure, arrival and approach procedures
е	Pre-flight inspection
f	Weather Minima
g	Taxiing/Air taxi in compliance with ATC or instructions of instructor
	PBN departure (if applicable):
h	<ul> <li>Check that the correct procedure has been loaded in the navigation system; and</li> </ul>
	Cross-check between the navigation system display and the departure chart.
i	Pre-take-off briefing, Take-off
j	Transition to instrument flight
k	Instrument departure procedures, including PBN departures
SECTIO	N 2 – GENERAL HANDLING
а	Control of the helicopter by reference solely to instruments, including:
b	Climbing and descending turns with sustained Rate 1 turn
С	Recoveries from unusual attitudes, including sustained 30° bank turns and steep descending turns
SECTIO	N 3 – EN-ROUTE IFR PROCEDURES
а	Tracking, including interception, e.g. NDB, VOR, RNAV
b	Use of radio aids
С	Level flight, control of heading, altitude and airspeed, power setting
d	Altimeter settings
е	Timing and revision of ETAs
f	Monitoring of flight progress, flight log, fuel usage, systems' management
g	Ice protection procedures, simulated if necessary
h	ATC liaison — compliance, R/T procedures
SECTIO	N 3a – ARRIVAL PROCEDURES
а	Setting and checking of navigational aids, if applicable
b	Arrival procedures, altimeter checks
С	Altitude and speed constraints, if applicable
	PBN arrival (if applicable):
d	<ul> <li>Check that the correct procedure has been loaded in the navigation system; and</li> </ul>
	Cross-check between the navigation system display and the departure chart.

Circle **O** when item passed Cross **X** when item failed

Applicant's first, last name(s):

SECTIO	ON 4 – 3D OPERATIONS (+)
	Setting and checking of navigational aids
_	Check Vertical Path angle for RNP APCH:
а	a) Check that the correct procedure has been loaded in the navigation system; and
	b) Cross-check between the navigation system display and the departure chart.
b	Approach and landing briefing, including descent/approach/landing checks
c (*)	Holding procedure
d	Compliance with published approach procedure
е	Approach timing
f	Altitude, speed heading control (stabilised approach)
g (*)	Go-around action
h (*)	Missed approach procedure/landing
i	ATC liaison- compliance, R/T procedures
SECTIO	DN 5 – 2D OPERATIONS (*)
а	Setting and checking of navigational aids
	For RNP APCH:
	Check that the correct procedure has been loaded in the navigation system; and
	Cross-check between the navigation system display and the departure chart.
b	Approach and landing briefing, including descent/approach/landing check, including identification of facilities
c (*)	Holding procedure
d	Compliance with published approach procedure
e	Approach timing
f	Altitude, speed, heading control (stabilised approach)
g (*)	Go-around action
h (*)	Missed approach procedure (*)/landing
i	ATC liaison- compliance, R/T procedures
	DN 6 – ABNORMAL AND EMERGENCY PROCEDURES
	ection may be combined with sections 1 through 5. The test shall have regard to control of the helicopter,
	ation of the failed engine, immediate actions (touch drills), follow-up actions and checks and flying accuracy, in the g situations:
a	Simulated engine failure after take-off and or on/during approach (**)
a	(at safe altitude unless carried out in and FFS or FNTP II/III, DTD 2.3)
b	Failure of stability augmentation devices/hydraulic system (if applicable)
C	Limited panel
d	Autorotation and recovery to a pre-set altitude
e	3D operations manually without flight director (***)
	3D operations manually with flight director (***)
	55 Sportations maintainy main ingrit an octor \ /

- (\*) To establish or maintain PBN privileges one approach in either Section 4 or Section 5 shall be and RNP APCH. Where an RNP APCH is no practicable, it shall be performed in and appropriately equipped FSTD
- (\*) To be performed in Section 4 or Section 5
- (\*\*) Multi-engine helicopter only
- (\*\*\*) Only one item to be tested

COMPLETED BY EXAMINER				
FCL.1030(a)(1), I have ensured that communication with the applicant can be established without language barriers.	YES 🗌	NO 🗌		
FCL.1030(a)(2), I have verified that the applicant complies with all the qualification, training and experience requirements in Part-FCL for the issue, revalidation or renewal of the licence, rating or certificate for which the skill test, proficiency check or assessment of competence is taken	YES	NO 🗌		
<b>FCL.1030(a)(3)</b> , I have made the applicant aware of the consequences of providing incomplete, inaccurate or false information related to their training and flight experience.	YES 🗌	NO 🗌		
FCL.1030(b)(1), I have informed the applicant of the result of the test.	YES 🗌	NO 🗌		
FCL.1030(b)(1), In the event of a partial pass or fail: I have informed the applicant that he/she may not exercise the privileges of the rating until a full pass has been obtained and detailed any further training requirement and explain the applicant's right of appeal.	YES	NO 🗌		
FCL.1030(b)(3), I have provided the applicant with a signed report of the skill test or proficiency check.	YES 🗌	NO 🗌		
FCL.1030(b)(3)(ii), I confirm that all the required manoeuvres and exercises have been completed, as well as information on the verbal theoretical knowledge examination, when applicable. If an item has been failed, I have recorded the reasons for this assessment.	YES	NO 🗌		
FCL.1030 (3)(iv)(v) In the case if the competent authority responsible for the	applicant's	licence is		
not the same that issued the examiner's certificate	T			
I hereby declare that I,, have reviewed and applied the relevant national procedures and requirements of the applicant's competent authority contained in version of the Examiner Differences Document.	YES 🗌	NO 🗌		
I have attached to this report a copy of the examiner certificate containing the scope of my privileges	YES	№ П		
as examiner.				
Any comment on, or disagreement with, an examiner's test or check evaluation				
Any comment on, or disagreement with, an examiner's test or check evaluation				
Any comment on, or disagreement with, an examiner's test or check evaluation				
Any comment on, or disagreement with, an examiner's test or check evaluation				
Any comment on, or disagreement with, an examiner's test or check evaluation				
Any comment on, or disagreement with, an examiner's test or check evaluation				
Any comment on, or disagreement with, an examiner's test or check evaluation				
Any comment on, or disagreement with, an examiner's test or check evaluation				
Any comment on, or disagreement with, an examiner's test or check evaluation				
Any comment on, or disagreement with, an examiner's test or check evaluation				
Any comment on, or disagreement with, an examiner's test or check evaluation during a debriefing:				
Any comment on, or disagreement with, an examiner's test or check evaluation during a debriefing:				
Any comment on, or disagreement with, an examiner's test or check evaluation during a debriefing:   Examiner's Name, Surname / Date / Signature  COMPLETED BY APPLICANT  I understand and agree with all above mentioned information and have no objections.	on or assess			
Any comment on, or disagreement with, an examiner's test or check evaluation during a debriefing:  Examiner's Name, Surname / Date / Signature  COMPLETED BY APPLICANT	on or assess			
Any comment on, or disagreement with, an examiner's test or check evaluation during a debriefing:   Examiner's Name, Surname / Date / Signature  COMPLETED BY APPLICANT  I understand and agree with all above mentioned information and have no objections.	on or assess			
Any comment on, or disagreement with, an examiner's test or check evaluation during a debriefing:   Examiner's Name, Surname / Date / Signature  COMPLETED BY APPLICANT  I understand and agree with all above mentioned information and have no objections.	on or assess			