

SECTION 1 – PRE-FLIGHT OPERATIONS INFLATION AND TAKE-OFF			
Use of checklist, airmanship, control of balloon by external visual reference, look-out procedures, etc. apply in all sections.			
Applicants license number and name:		Pass	Fail
a	Pre-flight documentation, flight planning, NOTAM and weather briefing	<input type="checkbox"/>	<input type="checkbox"/>
b	Balloon inspection and servicing	<input type="checkbox"/>	<input type="checkbox"/>
c	Load calculation	<input type="checkbox"/>	<input type="checkbox"/>
d	Crowd control, crew and passenger briefings	<input type="checkbox"/>	<input type="checkbox"/>
e	Assembly and layout	<input type="checkbox"/>	<input type="checkbox"/>
f	Inflation and pre-take-off procedures	<input type="checkbox"/>	<input type="checkbox"/>
g	Take-off	<input type="checkbox"/>	<input type="checkbox"/>
h	ATC compliance(if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
SECTION 2 – GENERAL AIRWORK			
		Pass	Fail
a	Climb to level flight	<input type="checkbox"/>	<input type="checkbox"/>
b	Level flight	<input type="checkbox"/>	<input type="checkbox"/>
c	Descent to level flight	<input type="checkbox"/>	<input type="checkbox"/>
d	Operating at low level	<input type="checkbox"/>	<input type="checkbox"/>
e	ATC compliance (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
SECTION 3 – EN-ROUTE PROCEDURES			
		Pass	Fail
a	Dead reckoning and map reading	<input type="checkbox"/>	<input type="checkbox"/>
b	Marking positions and time	<input type="checkbox"/>	<input type="checkbox"/>
c	Orientation and airspace structure	<input type="checkbox"/>	<input type="checkbox"/>
d	Maintenance of altitude	<input type="checkbox"/>	<input type="checkbox"/>
e	Ballast management	<input type="checkbox"/>	<input type="checkbox"/>
f	Communication with retrieve crew	<input type="checkbox"/>	<input type="checkbox"/>
g	ATC compliance	<input type="checkbox"/>	<input type="checkbox"/>
SECTION 4 – FLIGHT PROCEDURES AND MANEUVRES			
		Pass	Fail
a	Approach from low level, missed approach and fly on	<input type="checkbox"/>	<input type="checkbox"/>
b	Approach from high level, missed approach and fly on	<input type="checkbox"/>	<input type="checkbox"/>
c	Pre-landing checks	<input type="checkbox"/>	<input type="checkbox"/>
d	Passenger pre-landing briefing	<input type="checkbox"/>	<input type="checkbox"/>
e	Selection of landing field	<input type="checkbox"/>	<input type="checkbox"/>
f	Landing, dragging and deflation	<input type="checkbox"/>	<input type="checkbox"/>
g	ATC compliance (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
h	Actions after flight	<input type="checkbox"/>	<input type="checkbox"/>
SECTION 5 – ABNORMAL AND EMERGENCY PROCEDURES			
This section may be combined with sections 1 through 4			
		Pass	Fail
a	Simulated closed appendix during take-off and climb	<input type="checkbox"/>	<input type="checkbox"/>
b	Simulated parachute or valve failure	<input type="checkbox"/>	<input type="checkbox"/>
c	Other abnormal and emergency procedures as outlined in the appropriate flight manual	<input type="checkbox"/>	<input type="checkbox"/>
d	Oral questions	<input type="checkbox"/>	<input type="checkbox"/>
		Examiners signature:	

APPLICATION AND REPORT FORM LAPL, BPL, SPL, PPL, CPL, IR SKILL TEST AND PROFICIENCY CHECK		
Applicant's last name(s):		
Applicant's first name(s):		LAPL: A <input type="checkbox"/> H <input type="checkbox"/> B <input type="checkbox"/> S <input type="checkbox"/>
Signature of applicant:		BPL: <input type="checkbox"/> SPL: <input type="checkbox"/>
Type of licence*:		PPL: A <input type="checkbox"/> H <input type="checkbox"/> As <input type="checkbox"/>
Licence number*:		CPL: A <input type="checkbox"/> H <input type="checkbox"/> As <input type="checkbox"/>
State:		IR: A <input type="checkbox"/> H <input type="checkbox"/> As <input type="checkbox"/>

1 Details of the flight			
Group, class, type of aircraft:		Registration:	
Aerodrome or site:	Take-off time:	Landing time	Flight time
Total flight time:			

2 Result of the test		
Pass <input type="checkbox"/>	Fail <input type="checkbox"/>	Partial pass <input type="checkbox"/>

3 Remarks:

Location and date:			
Examiner's certificate number:		Type and number of license:	
Signature of examiner:		Name(s) in capital letters:	

**APPLICANT'S DECLARATION / IZJAVA KANDIDATA**

I declare that the information provided on this form is correct and I have been informed of the result of the skill test, proficiency check or assessment of competence.

*Izjavljujem kako su podaci na ovom obrascu točni, te kako sam upoznat s rezultatom ispita praktične osposobljenosti, provjere stručnosti ili procjene stručnosti.*

<b>Name</b> <i>Ime</i>		<b>Signature</b> <i>Potpis</i>		<b>Date</b> <i>Datum</i>	
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**EXAMINER SHALL BEFORE TEST / ISPITIVAČ ĆE PRIJE TESTA:**

- (1) ensure that communication with the applicant can be established without language barriers;
- (2) verify 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;
- (3) make the applicant aware of the consequences of providing incomplete, inaccurate or false information related to their training and flight experience.

*(1) osigurati da komunikacija s podnositeljem zahtjeva može biti uspostavljena bez jezičnih prepreka*

*(2) potvrditi da podnositelj zahtjeva ispunjava sve kvalifikacije, zahtjeve osposobljavanja i iskustva Dijela-FCL za stjecanje, produžavanje ili obnavljanje dozvole, ovlaštenja ili certifikata za koji se ispit praktične osposobljenosti, provjera stručnosti ili procjena stručnosti provodi*

*(3) upoznati podnositelja zahtjeva s posljedicama dostavljanja nepotpunih, netočnih ili neistinitih informacija vezano uz njihovo osposobljavanje i letačko iskustvo*

**EXAMINER'S DECLARATION:**

I DECLARE THAT I received information from the applicant regarding his/her experience and instruction, and found that experience and instruction complying with the applicable requirements in Part-FCL.

*IZJAVLJUJEM kako sam primio sve informacije od kandidata vezano za njegovo iskustvo i osposobljavanje, i potvrdio da su iskustvo i osposobljavanje u skladu s primjenjivim zahtjevima Dijela-FCL.*

**EXAMINER'S CONFIRMATION:**

I confirm that all the required manoeuvres and exercises have been completed, and that the applicant's theoretical knowledge has been confirmed by verbal examination (where applicable).

*Potvrđujem kako su svi zahtijevani manevri i vježbe provedeni, te je potvrđeno kandidatovo teorijsko znanje usmenim ispitivanjem (kada je primjenjivo)*

<b>Name</b> <i>Ime</i>		<b>Signature</b> <i>Potpis</i>		<b>Date</b> <i>Datum</i>	
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**ADDITIONAL DECLARATION FOR non-CCAA EXAMINERS / DODATNA IZJAVA ZA non-CCAA ISPITIVAČE**

'I hereby declare that I have reviewed and applied the relevant national procedures and requirements of the applicant's competent authority contained in version \_\_\_\_\_ (insert document version, i.e. 01-2014) of the Examiner Differences Document, as published by EASA.

*Ovim putem izjavljujem kako sam se upoznao i primijenio relevantne nacionalne zahtjeve i procedure tijela nadležnog za izdavanje dozvole podnositelja zahtjeva koje se nalaze u verziji \_\_\_\_\_ (upiši broj verzije dokumenta, npr. 01-2014) Examiners Difference Dokumenta, izdanog od strane EASA-e*

<b>Name</b> <i>Ime</i>		<b>Signature</b> <i>Potpis</i>		<b>Date</b> <i>Datum</i>	
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Examiners remarks from skill test/ proficiency check / assessment of competence:

*Primjedbe i napomene ispitivača s ispita praktične osposobljenosti / provjere stručnosti / procjene stručnosti*