

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	Fuel 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 fire on the ground and in the air	<input type="checkbox"/>	<input type="checkbox"/>
b	Simulated pilot light and burner failures	<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.

Name <i>Ime</i>		Signature <i>Potpis</i>		Date <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)

Name <i>Ime</i>		Signature <i>Potpis</i>		Date <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

Name <i>Ime</i>		Signature <i>Potpis</i>		Date <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