**EXAMINER DECLARATION**

I, the undersigned\_(first name & last name) \_, holder of the license no. \_\_-FCL -\_\_\_\_\_ , Examiner expiration date\_\_\_\_\_\_\_\_, on \_(date)\_\_\_, I carried out a briefing to update the required level of the related theoretical knowledge including the applicable maneuvers including those relating to abnormal and emergency procedures to the following pilot:

**First & last name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Licence Num** : -FCL-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Birth date & place:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Other relevant informations**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CLASS/TYPE RATING & ADDITIONAL CERTIFICATIONS**

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| ENACvert.tif**RATING OR CERTIFICATE ENDORSMENT**  | **DATE OF EXPIRATION RATING OR****CERTIFICATE** | **DATE OF BRIEFING AS FOR** **ENAC NI-010** | **RATING EXTENSION DATE AS FOR ENAC** **NI-010** | **EXAMINER CERTIFICATE NUMBER**  | **EXAMINER SIGNASTURE**  |
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Date & place:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Examiner signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_