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|  | | | | | | **APPLICATION AND REPORT FORM FOR:**  **BPL SKILL TEST**  **PROFICIENCY CHECK (BPL recency)**  **PROFICIENCY CHECK (Commercial operation rating)**  **AMC1 BFCL.410(b)(3)** | | | | | | | | | |
| Tick as applicable | | | I hereby apply for the issue of the following, in accordance with Annex III (Part-BFCL) to Regulation (EU) 2018/395:  ⃞ Balloon pilot licence (BPL) ⃞ Commercial operation rating | | | | | | | | | | | | |
| I hereby apply for the issue of the following, in accordance with Annex III (Part-BFCL) to Regulation (EU) 2018/395:  ⃞ Proficiency check (BPL — recency) ⃞ Proficiency check (commercial operation rating) | | | | | | | | | | | | |
| **1** | **Applicant’s personal particulars:** | | | | | | | | | | | | | | |
| Applicant’s last name(s): | | | | | | | | | First name(s): | | | | | | |
| Date of birth: | | | | | | | | Telephone: | | | | Email: | | |
| Address: | | | | | | | | | Country: | | | | | | |
| Date: | | | | | | | | | Signature of the applicant: | | | | | | |
| **2** | **Licence details** | | | | | | | | | | | | | | |
| Licence number (if applicable): | | | | | | | | | | | | | | | |
| Class extension(s):  (tick as applicable) | | | | ⃞ Hot-air balloons/Groups: ⃞ A ⃞ B ⃞ C ⃞ D  ⃞ Gas balloons  ⃞ Hot-air airships | | | | | | | | | | | |
| FROM HERE TO BE COMPLETED BY THE EXAMINER | | | | | | | | | | | | | | | |
| **3** | **Details of the skill test/proficiency check flight** | | | | | | | | | | | | | | |
| Date: | | | | | | | Class/group of balloon: | | | | | | Registration: | | |
| Take-off site: | | | | | Take-off time: | | | | | Landing time: | | | | Flight time: | |
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| Total flight time: | | | | | | | | | | | | | |  | |
|  | | | | | | | | | | | | | | | |
| **4** | **Result of the test or check** | | | | | | | | | | | | | | |
| Skill test/proficiency check details (including information on oral theoretical knowledge examination, where applicable): | | | | | | | | | | | | | | | |
| ⃞ Passed | | | | | | | ⃞ Partially passed | | | | | | ⃞ Failed | | |
| **5** | **Remarks** | | | | | | | | | | | | | | |
| Reasons and details in case of fail or partial pass/other remarks as necessary: | | | | | | | | | | | | | | | |
| **6** | **Examiner’s declarations and details** | | | | | | | | | | | | | | |
| I, the undersigning examiner:  - have received information from the applicant regarding their experience and instruction, and found that the experience and instruction comply with the applicable requirements of Annex III (Part-BFCL) to Regulation (EU) 2018/395;  - confirm that all the required manoeuvres and exercises have been completed, unless specified otherwise above in the case of fail or partial pass; and  - where applicable, have reviewed and applied the national procedures and requirements of the applicant’s competent authority which is different from the competent authority that issued my examiner certificate. | | | | | | | | | | | | | | | |
| Examiner’s certificate number: | | | | | | | | | | | Examiner’s BPL number: | | | | |
| Examiner’s name (capital letters): | | | | | | | | | | | Date and examiner’s signature: | | | | |
| **7** | | **Attachments** | | | | | | | | | | | | | |
| Detailed report of skill test or proficiency check as per AMC1 BFCL.145 or AMC1 BFCL.215 (as applicable) to be attached | | | | | | | | | | | | | | | |
| Copy of the FE(B) certificate (in cases where the competent authority of the applicant is different from the competent authority of the examiner) | | | | | | | | | | | | | | | |

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