

Assessment Form (Core Knowledge)

Document ref: 27

Issue: 3 Date: 27/10/2022

APPLICANT DETAILS													
Name													
Email				Mobile	Mobile								
Nationality				Date o	Date of Birth								
LICENCES													
License (ATPL/CPL/PPL/ (A)/(H)) Authority (CAA/EAS	SA/FAA etc)	Number							
				<u> </u>									
ENGLISH LEVEL (please circle the relevant number)													
Pre-elementary	Pre-elementary Elementary Pre-0			rational Operational			Extended			Expert/Native			
1 🔘		2	3	0	4	0	5 (0		6 💽		
WRITTEN EXAMS	(if applicat	alo)											
WKII I LIN EXAMS	(ii applicat	,											
Date of last written exam	ı			Type of exam (CPL /				IR)					
EXPERIENCE (civi			_										
Type (example)	SP/MP	IR	Hours VFR	Hours IFR	s Hour last 1 mths	12	valid until un		PC (I) v		Last flight:		
EC135	SP	Yes	400	25	8		31/10/22		31/10/22		3/4/22		
				1									
UK MILITARY EXP	PERIENCE	(RAF/NA)	/Y/ARMY -	- delete	e as applic	able)							
Туре	PIC SE		ME	IR? Procedural IR? PBN? QHI?									
. 74-5			urs)		1 100044					—			
SPECIFIC QUESTIONS (if applicable)													
If requiring multi-pilot do you hold an MCC exemption certificate?													
If PPL (for ME course only) what was your date of completion of pre-													
entry requirements, and who was the provider ?													



Assessment Form (Core Knowledge)

Document ref:	
27	

Issue: 2

Date: 27/06/2022

INSTRUCTOR/EXAMIN	NER QUALIFICATIONS (civilian)						
Qualification		Expiry Date					
	_						
COURSES REQUIRED							
	ire? (include differences courses if						
applicable, eg. EC145 D2 to	EC145 D3)						
0 1:1 : 60							
On which aircraft?							
VFR / IFR / both?							
If IFR required, are you alrea	dy PBN qualified?						
SP / MP / both?		, or requirements (e.g. on dates available/job starting, etc.) or					
DECLARATION BY TR	RAINEE (please sign and scan, or	r sign electronically if able)					
I certify all the above stateme	ents are correct						
Name and Date (please print)							
Please email a signed of	(i.e. MCC exemption, course comple	licence, medical and any other applicable documents etion certificates (if applicable)					
Course Number		_					
Course Title							
Ground School Days							

Course Title
Ground School Days
FFS/FTD hours training
(including which simulator)

Aircraft hours for training
FFS/FTD hours testing
(including which simulator)

Aircraft hours for testing
(including which simulator)

Aircraft hours for testing

Miscellaneous