



Form. No. RPPL-F-910F1c
AMDT No. 1
Page 1 of 2
Issue Date: 01/10/2019

PART-FCL
RECORD OF SUPERVISED SOLO FLIGHTS OR AIR EXERCISES FOR REMOVAL OF
SUPERVISORY RESTRICTION FROM AN INSTRUCTOR CERTIFICATE IN ACCORDANCE WITH
PART-FCL

Please complete this form in BLOCK CAPITALS using black or dark blue ink.

FALSE REPRESENTATION STATEMENT: It is an offence for a person to make, procure to be made, or assist in making any false representations for the purpose of procuring for any reason the issue, validation, extension or re-issue of a licence or the issue, renewal or revalidation of a rating, authorisation or certificate, whether for that person or any other person.

1. RECORD OF SUPERVISED SOLO FLIGHTS/AIR EXERCISES TO REMOVE SUPERVISORY RESTRICTION FCL.910.FI								To be completed by applicant
	Date of flight	Students name	Students licence or reference number	Exercise Number of Air Exercise	Name of Supervising Flight Instructor	Signature of Supervising Flight Instructor	Licence Number of supervising Flight Instructor	Name of ATO Flight training conducted with and approving competent Authority
1								
2								
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1. RECORD OF SUPERVISED SOLO FLIGHTS/AIR EXERCISES TO REMOVE SUPERVISORY RESTRICTION FCL.910.FI To be completed by applicant

	Date of flight	Students name	Students licence or reference number	Exercise Number of Air Exercise	Name of Supervising Flight Instructor	Signature of Supervising Flight Instructor	Licence Number of supervising Flight Instructor	Name of ATO Flight training conducted with and approving competent Authority
17								
18								
19								
20								
21								
22								
23								
24								
25								

2. TOTAL HOURS INSTRUCTION GIVEN To be completed by the Applicant

I have conducted hours of flight instruction and meet the requirements of FCL.910.FI(c) for the removal of the supervisory restriction

3. FLIGHT INSTRUCTION EXPERIENCE CONFIRMATION To be completed by the Applicant

I certify that the details listed above are correct and meet the requirements of FCL.910.FI(c) for the removal of the supervisory restriction:
 Name of Applicant:..... IAA Reference Number.....

Signature of Applicant: Date:

PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1