



Form. No. RPPL-F-SFCL350c  
AMDT No. 0  
Page 1 of 3  
Issue Date: 29/07/2020

**PART-SFCL**  
**RECORD OF SUPERVISED SOLO FLIGHTS OR LAUNCHES FOR REMOVAL OF**  
**SUPERVISORY RESTRICTION FROM AN INSTRUCTOR CERTIFICATE IN ACCORDANCE**  
**WITH PART-SFCL.350c**

**Please complete this form in BLOCK CAPITALS using black 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 FLIGHT INSTRUCTION/LAUNCHES TO REMOVE SUPERVISORY RESTRICTION SFCL.350.FI(S)** To be completed by applicant

	Date of flight	Students name	Students licence or reference number	Exercise Number of Air Exercise	Flight Instruction or Launch	Name of Supervising Flight Instructor	Signature of Supervising Flight Instructor	Licence Number of supervising Flight Instructor	Name of ATO / DTO Flight training conducted with and approving competent Authority
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1. RECORD OF SUPERVISED FLIGHT INSTRUCTION/LAUNCHES TO REMOVE SUPERVISORY RESTRICTION SFCL.350.FI(S) <span style="float: right;">To be completed by applicant</span>									
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When completing the form record that you completed at least 15 hours flight instruction covering all phases of a sailplane flight, OR 50 launches of flight instruction covering all phases of a sailplane flight.- DO NOT mix hours and launches.

2. TOTAL HOURS INSTRUCTION GIVEN / LAUNCHES COMPLETED <span style="float: right;">To be completed by applicant</span>
I have conducted <input type="text"/> hours flight instruction / <input type="text"/> launches of flight instruction and meet the requirements of SFCL.350 FI(S)(c) for the removal of the supervisory restriction

3. FLIGHT INSTRUCTION EXPERIENCE CONFIRMATION <span style="float: right;">To be completed by applicant</span>
I certify that the details listed above are correct and meet the requirements of SFCL.350.FI(S)(c) for the removal of the supervisory restriction:
Name of Applicant: ..... IAA Reference Number.....
Signature of Applicant: ..... Date: .....

**Submit this form with a completed RPPL.F.095 form.  
 PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1**