

## **CIVIL AVIATION AUTHORITY**

CZECH REPUBLIC

## ASSESSMENT OF COMPETENCE REPORT FORM

TRI(MPA), SFI(A) AoC at A/C

Applicant's last name:	Applicable aircraft type:		
Applicant's first name:	Initial issue		
Type of license held:	Extension		
Number of license:	Renewal		
State of license issue:	Revalidation		
	FFS only restriction removal		

ASSESSMENT OF INSTRUCTOR'S SKILLS							
1.Pre-session briefing							
<b>1.1</b> Is the content of the briefing in accordance with the training program	S⁺	S	S	F			
1.2 Designating the main task of the flight training	S⁺	S	S	F			
<b>1.3</b> Use of training tools (media, projector, presentation)	S⁺	S	S	F			
1.4 Time concept of the briefing	S⁺	S	S	F			
2. In-flight exercises							
2.1 Flight training time management	S⁺	S	S	F			
2.2 Cooperation with safety pilot	S⁺	S	S	F			
2.3 Procedure discrepancies and mistake corrections	S⁺	S	S	F			
2.4 Operation skills	S⁺	S	S	F			
2.5 Flight control takeover technique	S⁺	S	S	F			
3. Post-flight De-briefing							
3.1 Analysis of the crews performance	S⁺	S	S	F			
<b>3.2</b> Using the training tools for description of pilot errors, explaining correct procedures (manuals, media, whiteboard drawings)			S	F			
3.3 Assessment of the crew / Progress criteria	S⁺	S	S	F			
3.4 Explanation of all relevant items (i.e. procedures, system operation)	$S^+$	S	S	F			
4. Instructor's approach							
4.1 Motivation of the trainees	S⁺	S	S	F			
4.2 Instructor attitude (calmness, leadership)	S⁺	S	S	F			
4.3 Climate and atmosphere during the training	S⁺	S	S	F			
5. Instructor's technical skills							
5.1 Theoretical and procedure knowledge of the instructor	S⁺	S	S	F			
5.2 Instructor's administrative procedure (Recording and documentation)	S⁺	S	S	F			
5.3 Consistency of the training with the original program	S⁺	S	S	F			
Performance evaluation scale: S <sup>+</sup> above standard S standard S <sup>-</sup> below standard F faile							



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Observations and overa	II assess	sment of the Insti	uctor's proficien	cy:			
Trained pilot(s) (name(s)):							
Training session: type rating							
ATO:							
Take-off time:	f time: Landing time:			Total time:			
Date:		Location:		A/C reg. mark:			
Passed □	Failed	□ Signature of applicant:		cant:			
Examiner's certificate number (if applicable):		Examiner's type and number of license:					
Signature of examiner:		Name in capital letters:					

\*Delete as appropriate