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| **CIVIL AVIATION AUTHORITY**  **CZECH REPUBLIC**  CAA-F-ZLP-007-0-21  **Flight Division** | | | | | | | | |
| **EXAMINER REPORT – FAILURE OF FLIGHT TEST OR CHECK** | | | | | | | | |
| **1** | **Applicant's Details:** | | | | | | | |
| Applicant's Last Name: | | | |  | | | | |
| Applicant's First Name: | | | |  | | | | |
| Type and No. of Licence Held: | | | |  | | | | |
| **2** | **Type of Test / Check:** | | | | | | | |
| Initial | | | | | Revalidation | | | Renewal |
| Type of Test / Check: | | | | | | | | |
| Class and Type of Aeroplane: | | | | | | | Registration: | |
| FSTD Type and Letter Code: | | | | | | | Total Flight Time: | |
| Date: | | | | | | | Place of Skill Test / Check: | |
| **3** | **Reason why Failed:** | | | | | | | |
| Section: | | Subsection: | Reason why failed: | | | | | |
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| **4** | **Additional Training Requirement:** | | | | | | | |
| Mandatory | | | | | Recommended | | | None |
| Flight Time: | | | | | | FSTD Time: | | |
| Details of Further Training Requirements: | | | | | | | | |
|  | | | | | | | | |
|  | | | | | | | | |
| Name of Examiner: | | | | | | Examiner's Certificate Number: | | |
| Signature of Examiner: | | | | | | Date: | | |
| I hereby acknowledge, I failed at above stated sections and subsections and may not exercise the privileges of the rating. | | | | | | | | |
| Signature of Applicant: | | | | | | Date: | | |