

Form. No. PEL-FCL SFCL350c

Revision 1

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Revision Date: 11/09/2023

## 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.

It is an offence for a person to make, procure to be made, or assist in making any false representations for the purposeof procuring for any reason the issue, validation, extension or re-issue of a license or the issue, renewal or revalidation of a rating, authorization or certificate, whether for that person or any other person.

1.1	RECORD O	F SUPERVISED F	LIGHT INSTRUCTION	/LAUNCHES	TO REMOV	/E SUPERVISOR	RY RESTRICTION S	FCL.350.FI(S) τ	o be completed by applicant
	Date of flight	Students name	Students license or reference number	Exercise Number of Air Exercise	Flight Instruction or Launch	Name of Supervising Flight Instructor	Signature of Supervising Flight Instructor	License Number of Supervising Flight Instructor	Name of ATO / DTO Flight training conducted with and approving competent Authority
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## PART-SFCL

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

1. RECORD O	F SUPERVISED F	LIGHT INSTRUCTIO	N/LAUNCHES	TO REMO	/E SUPERVISOI	RY RESTRICTION S	FCL.350.FI(S)	To be completed by applicant
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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 To be completed by applicant								
I have conducted hours flight instruction / 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  To be completed by applicant								
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:								