



**Send to:**  
**postmottak@caa.no** (pdf format only) or  
**Luftfartstilsynet**  
**Postboks 243**  
**8001 BODØ**

APPROVED APPLICATION AND REPORT FORM FOR THE PPL(H)  
SKILL TEST, ACCORDING TO EASA AMC2 FCL.235.

## Application for Private Pilot Licence Helicopter - PPL(H)

1. Test and licence endorsement (To be completed by the examiner)		
Licence endorsement (type)	Date of test	Total flight time

2. Personal details of applicant (To be completed by applicant)		
Date of birth	Licence number (if applicable)	State of issue
Last name		First name(s)
Address		Postal code and city
Phone	E-mail	
Date	Signature of the applicant	

3. Payment (To be completed by applicant)
<p>The application is subject to a charge in accordance with BSL A 1-2 "Forskrift om gebyr til Luftfartstilsynet (Gebyrforskriften)".</p> <p> <input type="checkbox"/> Invoice payment by applicant             <span style="margin-left: 100px;"><input type="checkbox"/> Invoice payment by company</span> </p> <p>Company name: ..... (Norwegian registered only.)</p>

4. Confirmation from DTO/ATO (To be completed by the DTO/ATO)		
Name of DTO/ATO	DTO/ATO-number	<input type="checkbox"/> I hereby confirm that the candidate has completed and passed all relevant training and is ready for the skill test for PPL(H), and that all relevant documentation is attached.
Signature of Head of training		Name in capital letters

**5. The following items shall be completed by the DTO/ATO and checked by the examiner prior to conducting the PPL(H) skilltest**

<input type="checkbox"/> Pilot logbook is checked, all flight time is correct	<input type="checkbox"/> Final test at DTO/ATO completed and passed
a) Applicant's age (MIN 17 years)	Years:
b) Medical class <input type="checkbox"/> Class 1 acc. Part-MED.A.030 <input type="checkbox"/> Class 2 acc. Part-MED.A.030	Valid until:
c) Theoretical examination PPL(H)	Passed Date:
d) Language proficiency English min. level 4 (if applicable)	Valid until:
e) Crediting of flight time according to Part.FCL210.H (MAX 6 HRS) Specify category of aircraft: .....	Hours:
f) Dual instruction (MIN 25 HRS)	Hours:
g) Instrument time (MIN 5 HRS) of which time in FSTD (MAX 5 HRS)	Hours: Hours:
h) Solo instruction (MIN 10 HRS) of which solo cross country (MIN 5 HRS)  Leg 1 DEP:                      DEST:                      NM: Leg 2 DEP:                      DEST:                      NM: Leg 3 DEP:                      DEST:                      NM: Total (MIN 185 KM/100 NM great circle distance)                      NM:	Hours: Hours:

**6. Details of the flight (To be completed by the examiner)**

Aircraft registration	Type of helicopter/variant	Rotor stopped	On ground
Departure aerodrome	Destination aerodrome	Rotor turning	Take-off
Name of PIC during test		Total block	Total

**7. Result of the test (To be completed by examiner)**

<b>Section 1</b> <input type="radio"/> Passed <input type="radio"/> Failed	<b>Section 2</b> <input type="radio"/> Passed <input type="radio"/> Failed	<b>Section 3</b> <input type="radio"/> Passed <input type="radio"/> Failed	<b>Section 4</b> <input type="radio"/> Passed <input type="radio"/> Failed	<b>Section 5</b> <input type="radio"/> Passed <input type="radio"/> Failed	<b>Section 6</b> <input type="radio"/> Passed <input type="radio"/> Failed
<b>Final result</b> <input type="radio"/> <b>Passed</b>			<input type="radio"/> <b>Partial Pass</b>		<input type="radio"/> <b>Failed</b>
<input type="radio"/> Temporary permission to act as pilot issued, valid (8 weeks from date of test) until: ..... <input type="radio"/> Temporary rating not issued					
<input type="checkbox"/> All prerequisites checked and confirmed			Date	Examiner certificate no	
Signature of examiner			Name in capital letters		

**8. Test (To be completed by examiner)**

<b>SECTION 1 PRE-FLIGHT OR POST-FLIGHT CHECKS AND PROCEDURES</b>		<b>Passed</b>	<b>Failed</b>
Use of checklist, airmanship, control of helicopter by external visual reference, anti-icing procedures, etc., apply in all sections.			
a	Helicopter knowledge, (e.g. technical log, fuel, mass and balance), flight planning, NOTAM and weather briefing.	<input type="checkbox"/>	<input type="checkbox"/>
b	Pre-flight inspection or action, location of parts and purpose.	<input type="checkbox"/>	<input type="checkbox"/>
c	Cockpit inspection and starting procedure.	<input type="checkbox"/>	<input type="checkbox"/>
d	Communication and navigation equipment checks, selecting and setting frequencies.	<input type="checkbox"/>	<input type="checkbox"/>
e	Pre-take-off procedure, R/T procedure and ATC compliance.	<input type="checkbox"/>	<input type="checkbox"/>
f	Parking, shutdown and post-flight procedure.	<input type="checkbox"/>	<input type="checkbox"/>
		Examiner's initials when test-section completed ..... <input type="checkbox"/> Passed <input type="checkbox"/> Failed	

<b>SECTION 2 HOVER MANOEUVRES, ADVANCED HANDLING AND CONFINED AREAS</b>		<b>Passed</b>	<b>Failed</b>
a	Take-off and landing (lift-off and touch down).	<input type="checkbox"/>	<input type="checkbox"/>
b	Taxi and hover taxi.	<input type="checkbox"/>	<input type="checkbox"/>
c	Stationary hover with head, cross or tail wind.	<input type="checkbox"/>	<input type="checkbox"/>
d	Stationary hover turns, 360° left and right (spot turns).	<input type="checkbox"/>	<input type="checkbox"/>
e	Forward, sideways and backwards hover manoeuvring.	<input type="checkbox"/>	<input type="checkbox"/>
f	Simulated engine failure from the hover.	<input type="checkbox"/>	<input type="checkbox"/>
g	Quick stops into and downwind.	<input type="checkbox"/>	<input type="checkbox"/>
h	Sloping ground or unprepared sites landings and take-offs.	<input type="checkbox"/>	<input type="checkbox"/>
i	Take-offs (various profiles).	<input type="checkbox"/>	<input type="checkbox"/>
j	Crosswind and downwind take-off (if practicable).	<input type="checkbox"/>	<input type="checkbox"/>
k	Take-off at maximum take-off mass (actual or simulated).	<input type="checkbox"/>	<input type="checkbox"/>
l	Approaches (various profiles).	<input type="checkbox"/>	<input type="checkbox"/>
m	Limited power take-off and landing.	<input type="checkbox"/>	<input type="checkbox"/>
n	Autorotations (FE to select two items from: basic, range, low speed and 360° turns).	<input type="checkbox"/>	<input type="checkbox"/>
o	Autorotative landing.	<input type="checkbox"/>	<input type="checkbox"/>
p	Practice forced landing with power recovery.	<input type="checkbox"/>	<input type="checkbox"/>
q	Power checks, reconnaissance technique, approach and departure technique.	<input type="checkbox"/>	<input type="checkbox"/>
		Examiner's initials when test-section completed ..... <input type="checkbox"/> Passed <input type="checkbox"/> Failed	

<b>SECTION 3 NAVIGATION – EN ROUTE PROCEDURES</b>		<b>Passed</b>	<b>Failed</b>
a	Navigation and orientation at various altitudes or heights and map reading.	<input type="checkbox"/>	<input type="checkbox"/>
b	Altitude or height, speed, heading control, observation of airspace and altimeter setting.	<input type="checkbox"/>	<input type="checkbox"/>
c	Monitoring of flight progress, flight log, fuel usage, endurance, ETA, assessment of track error and re-establishment of correct track and instrument monitoring.	<input type="checkbox"/>	<input type="checkbox"/>
d	Observation of weather conditions and diversion planning.	<input type="checkbox"/>	<input type="checkbox"/>
e	Use of navigation aids (where available).	<input type="checkbox"/>	<input type="checkbox"/>
f	ATC liaison with due observance of regulations, etc.	<input type="checkbox"/>	<input type="checkbox"/>
		Examiner's initials when test-section completed ..... <input type="checkbox"/> Passed <input type="checkbox"/> Failed	

<b>SECTION 4 FLIGHT PROCEDURES AND MANOEUVRES</b>		<b>Passed</b>	<b>Failed</b>
a	Level flight, control of heading, altitude or height and speed.	<input type="checkbox"/>	<input type="checkbox"/>
b	Climbing and descending turns to specified headings.	<input type="checkbox"/>	<input type="checkbox"/>
c	Level turns with up to 30° bank, 180° to 360° left and right.	<input type="checkbox"/>	<input type="checkbox"/>
d	Level turns 180° left and right by sole reference to instruments.	<input type="checkbox"/>	<input type="checkbox"/>
		Examiner's initials when test-section completed ..... <input type="checkbox"/> Passed <input type="checkbox"/> Failed	

<b>SECTION 5 ABNORMAL AND EMERGENCY PROCEDURES</b>		<b>Passed</b>	<b>Failed</b>
Note (1): Where the test is conducted on an ME helicopter, a simulated engine failure drill, including an SE approach and landing should be included in the test. Note (2): The FE should select four items from the following:			
a	Engine malfunctions, including governor failure, carburettor or engine icing and oil system, as appropriate.	<input type="checkbox"/>	<input type="checkbox"/>
b	Fuel system malfunction.	<input type="checkbox"/>	<input type="checkbox"/>
c	Electrical system malfunction.	<input type="checkbox"/>	<input type="checkbox"/>
d	Hydraulic system malfunction, including approach and landing without hydraulics, as applicable.	<input type="checkbox"/>	<input type="checkbox"/>
e	Main rotor or anti-torque system malfunction (FFS or discussion only).	<input type="checkbox"/>	<input type="checkbox"/>
f	Fire drills, including smoke control and removal, as applicable.	<input type="checkbox"/>	<input type="checkbox"/>
g	Other abnormal and emergency procedures as outlined in an appropriate flight manual and with reference to Appendix 9 C to Part-FCL, sections 3 and 4, including for ME helicopters: <ul style="list-style-type: none"> <li>a) Simulated engine failure at take-off:               <ul style="list-style-type: none"> <li>1) Rejected take-off at or before TDP or DPATO.</li> <li>2) Shortly after TDP or DPATO.</li> </ul> </li> <li>b) Landing with simulated engine failure:               <ul style="list-style-type: none"> <li>1) Landing or go-around following engine failure before LDP or DPBL;</li> <li>2) Following engine failure after LDP or safe forced landing after DPBL.</li> </ul> </li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>
		Examiner's initials when test-section completed ..... <input type="checkbox"/> Passed <input type="checkbox"/> Failed	

**9. Remarks (To be completed by the examiner)**

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<input type="checkbox"/> De-briefing / taken part of comments above	Date	Signature of applicant
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**10. Verification of compliance in accordance with ARA.GEN.315 and AMC1 ARA.GEN.315(a)**

<input type="checkbox"/> I am not holding any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another Member State.	
<input type="checkbox"/> I have not applied for any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category in another Member State.	
<input type="checkbox"/> I have never held any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another Member State which was revoked or suspended in any other Member State.	
<input type="checkbox"/> I hereby declare that all the statements in connection with this application are complete and correct. I understand that any false or misleading statement could disqualify me from being granted a personell licence, certificate, rating, authorisation or attestation.	
Date	Signature of applicant

**11. Declaration of national procedure and requirements for non-Norwegian examiners according to FCL.1030(b)(3)(iv)**

I hereby declare that I have reviewed and applied the relevant national procedures and requirements of the applicant's competent authority contained in version ..... of the Examiner Differences Document.

Date	Signature of examiner
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**12. After test (To be completed by the examiner)**

<b>Attach the following documentation to the application:</b> <ul style="list-style-type: none"><li><input type="checkbox"/> Copy of Passport or National identity card</li><li><input type="checkbox"/> Copy of medical certificate</li><li><input type="checkbox"/> Copy of PPL theoretical examination results (not applicable for examinations provided by Norwegian CAA)</li><li><input type="checkbox"/> Copy of technical course completion certificate</li><li><input type="checkbox"/> Copy of Language proficiency Assessment (LPA) Form, NF-1071</li><li><input type="checkbox"/> Copy of Temporary Language Proficiency, NF-1076 (if issued)</li><li><input type="checkbox"/> Copy of Temporary Permission to act as Pilot, NF-1094 (if issued)</li><li><input type="checkbox"/> Copy of at least the two last pages of the logbook</li></ul>	<b>For non-Norwegian examiner licence holders:</b> <ul style="list-style-type: none"><li><input type="checkbox"/> Copy of examiners licence</li><li><input type="checkbox"/> Copy of examiners certificate</li><li><input type="checkbox"/> Copy of examiners medical</li></ul> <b>For non-Norwegian approved DTO/ATO:</b> <ul style="list-style-type: none"><li><input type="checkbox"/> Copy of DTO/ATO approval certificate</li></ul>
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**All attached copies shall be readable and in colour.  
Please note that failure to submit all required documentation  
may result in the return of your application.**

**Read our privacy policy here:**

In order to process your application we need information about you for identification to secure that the rating/licence is issued/revalidated/renewed to the correct person. Your personal data will be handled in accordance with regulation (EU) 2016/679 – General Data Protection Regulation (GDPR). Article 6 (1)(e), Civil Aviation Act § 5-3 regulation on certifying crewmember and EU-regulation no. 1178/2011 FCL.015 and MED. A.035 specifies the criteria on which your application will be processed.

Your personal data will be stored only as long as required for the purpose in which they were collected. You have the right to access your personal data, and, if necessary, have them corrected. If you believe that your personal data is not handled in accordance with the GDPR, you may appeal to the Norwegian Data Protection Authority. The Civil Aviation Authority – Norway (CAA-N) is responsible for the processing of your application. Contact our data protection officer at [personvernombud@caa.no](mailto:personvernombud@caa.no).

All written inquiries to CAA-N are subject to the Archive Act and the Freedom of Information Act. The public's right to access information does not apply to personal data which is subject to confidentiality. Read our privacy policy here: <https://luffartstilsynet.no/en/about-us/privacy-policy/>