

**BRITISH MICROLIGHT AIRCRAFT ASSOCIATION**

**NATIONAL PRIVATE PILOT'S LICENCE (AEROPLANES) MICROLIGHT RATING – APPLICATION**

Please complete the form in block capitals using black or dark blue ink.

**1. APPLICATION DETAIL: I am applying for (tick appropriate boxes). TO BE COMPLETED BY THE APPLICANT**

NPPL rated for Microlights	<input type="checkbox"/>
With operational limitations	<input type="checkbox"/>
Without operational limitations	<input type="checkbox"/>
The removal of operational limitations from a NPPL or UK PPL M	<input type="checkbox"/>
The addition of a Microlight Rating to a UK NPPL or UK PPL or JAA PPL	<input type="checkbox"/>

**2. PERSONAL DETAILS(fill in details or tick appropriate boxes). TO BE COMPLETED BY THE APPLICANT**

Surname ..... Forename(s) .....

Title ..... Date of birth (dd/mm/yyyy) .....

Nationality ..... Town ..... and Country ..... of birth

Permanent address .....

..... Postcode .....

Address for correspondence (if different from above) .....

.....

Telephone Number ..... Alternative Telephone .....

Have you ever held a UK issued CAA or JAR licence? Yes  No

Have you ever held a UK issued Radiotelephony Licence? Yes  No

Have you ever held a UK Issued Class 1, 2 ,or 3 medical certificate? Yes  No

**If you have answered Yes above please state your CAA reference number or licence number**

CAA Personal reference number (if known)

**3. PARTICULARS OF APPLICANT'S MEDICAL CERTIFICATION AND ANY PILOT'S LICENCES HELD OR APPLIED FOR. TO BE COMPLETED BY THE APPLICANT**

(Include non-UK licences)

Issuing Authority	Class	Licence No.	Expiry Date

Radiotelephony Licence No. (if held) .....

Date of last Medical (dd/mm/yyyy) .....

<b>4. FLYING EXPERIENCE IN MICROLIGHT AEROPLANES AND COURSE CERTIFICATE.</b>					<b>TO BE COMPLETED BY THE CHIEF FLYING INSTRUCTOR</b>				
Details of training and experience required	Hours claimed	Qualifying Minima							
		With operational limitations	Without operational limitations	Removal of operational limitations					
4.1 Total experience undergoing flying training in microlights conducted by a qualified flying instructor		15	25	25 Total flight time					
4.2 Total flying experience as pilot-in-command of microlights <b>(excluding GST)</b>		7	10	10					
4.3 Total experience as pilot-in-command of microlights in preceding nine months <b>(excluding GST)</b>		7	10	3 (navigation training)					
4.4 Total experience undergoing flight navigation training conducted by a qualified flying instructor in preceding nine months		0	5	5 (navigation training)					
4.5 Total experience as pilot-in-command undergoing flight navigation training conducted by a qualified flying instructor in preceding nine months		0	3	3					
4.6 Dates of two solo qualifying cross country flights under the supervision of a flying instructor for applications for a NPPL without operational limitations or the removal of operational limitations from an existing licence		..... (dd/mm/yyyy)							
		..... (dd/mm/yyyy)							
<p><b>I certify that .....</b> has completed a course of flying and ground instruction for the National Private Pilot's Licence Microlight Class Rating or removal of operational limitations (as applied for in Section 1 of this form) in accordance with the NPPL Microlight Syllabus and that the hours and cross country flights recorded above are correct.</p> <p>The course started on ..... and was completed on ..... (dates)</p> <p>Signature ..... Name (block letters) .....</p> <p>CFI at Club / School ..... Date .....</p>									

<b>5. GROUND EXAMINATIONS RECORD.</b>				<b>TO BE COMPLETED BY THE AUTHORISED EXAMINER(S)</b>		
Subject	Date of Examination	Set No.	Percentage Mark (70% min. for pass)	Examiner's signature	Examiner's surname	CAA Examiner number
Aviation Law						
Human Performance						
Navigation						
Meteorology						
Aircraft (General)						
Aircraft (Type) (Ground Oral)		Pass / Fail* (*Delete as applicable)				

**6. GENERAL SKILLS TEST.**

**TO BE COMPLETED BY THE FLIGHT EXAMINER**

Name of Applicant:

Aircraft Type(s):	Registration:	Place of Test:	Duration of Test:

<b>PREPARATION FOR FLIGHT</b>	Date	<b>STALLING continued</b>	Date
Weather suitability		Turning	
Aircraft documents check		In approach configuration	
Weight and balance calculation		<b>SPIN AVOIDANCE</b>	Date
Weight and performance calculation		Recovery at the incipient stage	
Fuel and oil state		<b>FORCED LANDING WITHOUT POWER</b>	Date
Aircraft acceptable		Checks	
Booking out, ATC		Procedure	
Pre-flight inspection		<b>NAVIGATION, ORIENTATION</b>	Date
<b>STARTING, TAXIING AND POWER CHECKS</b>	Date	Recognition of features	
Pre-start checks		Assessment of heading	
Post-start checks		<b>INITIAL APPROACH PROCEDURES</b>	
Taxiing techniques		<b>CIRCUIT PROCEDURES</b>	
Power checks		<b>APPROACH AND LANDING</b>	Date
<b>TAKE-OFF</b>	Date	Pre-landing checks (vital actions)	
Pre-take-off checks (vital actions)		Powered approach	
During and post-take-off checks		Glide approach	
Normal take-off		Crosswind	
Crosswind take-off		Assessment of crosswind component	
Assessment of crosswind component		Checks after landing	
<b>AERODROME DEPARTURE PROCEDURES</b>		<b>MISSED APPROACH PROCEDURES</b>	
<b>CLIMBING</b>		<b>SIMULATED EMERGENCIES</b>	Date
<b>STRAIGHT AND LEVEL FLIGHT</b>		Engine fire in the air/on the ground	
<b>DESCENDING USE OF POWER, FLAP, SPOILER</b>		Cabin fire in the air/on the ground	
<b>TURNING</b>		Engine failure after take off	
Level		<b>OTHER SIMULATED EMERGENCIES</b>	
Climbing		<b>ENGINES AND SYSTEMS HANDLING</b>	
Descending		<b>AIRMANSHIP AND AWARENESS</b>	Date
At high angles of bank		Lookout	
<b>UNUSUAL ATTITUDES</b>	Date	Positioning – restricted airspace, hazards, weather	
Recovery from spiral dives and sideslips		ATC liaison	
Recovery from a steep climbing turn		Aerodrome discipline	
<b>STALLING</b>	Date	<b>ACTION AFTER FLIGHT</b>	Date
Checks before stalling		Engine shut down	
Recovery from developed stall		Parking and security aircraft	
Recovery at the incipient stage		Recording flight details	
Straight			

**Note:** Pilots taking the test must undertake all sections of the test on this page, except for parts inappropriate to the aircraft type.

**I certify that :**

- (a) I have examined the training schedule which this applicant has completed: and
- (b) I have conducted a flight test during which this applicant has demonstrated his ability to perform satisfactorily the manoeuvres listed above and recorded the flight details in the applicant's personal flying logbook.
- (c) I am therefore satisfied that the applicant has reached the standard of flying required for the grant of a NPPL Microlight Class Rating.

Examiner's Signature ..... CAA Examiner Authorisation No. ....

Examiner's Name ..... Date of Signature .....

**7. APPLICANT'S DECLARATION.****TO BE COMPLETED BY THE APPLICANT**

I declare that the information provided on this form is correct, that since the date on which I was medically certified as to my fitness to hold a National Private Pilot's Licence, I have not suffered from any defect, disability or disease. I understand the requirements and conditions to be met in respect of my application.

\* I accept that my name and address may be used by the CAA, the BMAA, a UK Flight Safety Organisation or a mailing house acting on behalf of any of these organisations for the purpose of sending me safety information.

\* Please delete if you do not accept that your name and address can be used in this way.

Applicant's Signature ..... Date of application .....

**It is an offence to make, with intent to deceive, any false representations for the purpose of procuring the grant, issue, or variation of any certificate, licence, approval, permission or other document. Persons doing so render themselves liable, on summary conviction, to a fine not exceeding the statutory minimum (currently £5000 or in Northern Ireland £2000) and on conviction on indictment to an unlimited fine or imprisonment for a term not exceeding two years or both.**

**8. SUBMISSION INSTRUCTIONS****Send your completed application form to:**

British Microlight Aircraft Association,  
The Bullring,  
Deddington,  
Banbury,  
Oxfordshire,  
OX15 0TT

Telephone 01869 338888

**Include in the application:**

- This form. NPPL 102 M
- Personal Flying Logbook
- Medical Declaration or Certificate
- Any existing Licenses / Certificates for which credit is sought or from which limitations are to be removed
- Proof of Identity countersigned by Chief Flying Instructor completing the course certificate on this application. You may choose one of the following: Copy of Passport showing your picture / Copy of Photo Driving Licence showing your picture / Copy of Birth Certificate
- Fee payable for the Rating to be granted. Cheques must be made payable to the "Civil Aviation Authority"

**PLEASE NOTE THAT FAILURE TO SUBMIT ALL OF THE REQUIRED DOCUMENTATION WILL LEAD TO A DELAY IN THE PROCESSING OF YOUR APPLICATION.**