

**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 With operational limitations	<input type="checkbox"/>
NPPL 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	<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 ..... CountRy ..... and Town ..... of birth	
Permanent address .....	
..... Postcode .....	
Address for correspondence (if different from above) .....	
.....	
Telephone Number ..... Alternative Telephone .....	
Email address: .....	
Have you ever held a UK issued pilot’s licence?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever held a UK issued Radiotelephony Licence?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever held a UK CAA issued medical certificate?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you made an on-line Pilot Medical Declaration?	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>If you have answered Yes to any of the above you will have a CAA reference number. Please enter it below. Failure to advise the CAA reference on this form will delay your application.</b>	
<b>Note: the CAA reference number will have a 6 number and 1 letter format e.g. 123456M, NOT a PMD-1234 format.</b>	
CAA Personal reference number (if known)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

3. PARTICULARS OF ANY PILOT’S LICENCES HELD.			TO BE COMPLETED BY THE APPLICANT
Issuing Authority	Licence No.	Class	

**4. FLYING EXPERIENCE IN MICROLIGHT AEROPLANES AND COURSE CERTIFICATE.** **TO BE COMPLETED BY THE CHIEF FLYING INSTRUCTOR**

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 twenty four months <b>(excluding GST)</b>		7	10	N/A
4.4 Total experience undergoing flight navigation training conducted by a qualified flying instructor in preceding twenty four months		N/A	5	5 (navigation training)
4.5 Total experience as pilot-in-command undergoing flight navigation training conducted by a qualified flying instructor in preceding twenty four months		N/A	3	3
4.6 Date(s) of solo qualifying cross country flight(s) 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. <b>Enter date and distance flown.</b>	..... (dd/mm/yyyy)			
	..... (dd/mm/yyyy)			

**I certify that .....** 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.

The course started on ..... and was completed on ..... (dates)

Signature ..... Name (block letters) .....

CFI at Club / School ..... Date .....

**5. GROUND EXAMINATIONS RECORD.** **TO BE COMPLETED BY THE AUTHORISED EXAMINER(S)**  
**Sign all records individually – Do not use dittos or curly brackets**

Subject	Date of Examination	Set No.	Percentage Mark	Examiner's signature	Examiner's surname	CAA Examiner number
Aviation Law						
Human Performance						
Navigation						
Meteorology						
Aircraft (General)						
Aircraft (Type) (Ground Oral)		Pass				

**6. GENERAL SKILLS TEST.**

**TO BE COMPLETED BY THE FLIGHT EXAMINER**

Name of Applicant:

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

PREPARATION FOR FLIGHT	Date	STALLING continued	Date
Weather suitability / NOTAM check		Recovery from developed stall - In turning flight	
Aircraft documents check		Recovery from developed stall - In approach configuration	
Weight and performance calculation		<b>FORCED LANDING WITHOUT POWER</b>	
Fuel state		Checks & Procedure	
Pre-flight inspection		<b>PRECAUTIONARY LANDING</b>	
Booking out & airfield procedures		Checks & Procedure	
<b>STARTING, TAXIING AND PRE-DEPARTURE CHECKS</b>		<b>OPERATION AT MINIMUM LEVEL</b>	
Pre-start checks		Procedure	
Post-start checks		<b>AERODROME JOINING</b>	
Taxiing techniques and checks		Procedure and awareness	
Pre-departure / power checks		<b>CIRCUIT JOINING PROCEDURES</b>	
<b>TAKE-OFF AND DEPARTURE</b>		Standard overhead join / other standard join	
Pre-take-off checks (vital actions)		<b>APPROACH AND LANDING</b>	
During and post-take-off checks		Pre-landing checks	
Normal take-off		Glide approach and use of sideslip	
Assessment of crosswind & crosswind take-off		Powered approach / Performance landing	
Performance take-offs		Assessment of crosswind & crosswind landing	
Aerodrome departure procedures		Checks after landing	
<b>NAVIGATION, ORIENTATION</b>		<b>MISSED APPROACH &amp; GO-AROUND</b>	
Recognition of features		Checks & Procedure	
Assessment of heading		<b>SIMULATED EMERGENCIES</b>	
<b>GENERAL HANDLING</b>		Engine fire in the air/on the ground	
Climbing		Cabin fire in the air/on the ground	
Straight and Level flight		Engine failure after take off	
Descending – use of power, flap, spoiler		Other simulated emergencies	
Turning - Level		<b>ENGINES AND SYSTEMS HANDLING</b>	
Turning - Climbing		Use and management throughout	
Turning - Descending		<b>AIRMANSHIP AND AWARENESS</b>	
Turning at high angles of bank		Lookout	
<b>UNUSUAL ATTITUDES</b>		Positioning – restricted airspace, hazards, weather	
Recovery from spiral dives		Aerodrome discipline & procedures	
Recovery from steep climbing turns		<b>ACTION AFTER FLIGHT</b>	
<b>STALLING</b>		Engine shut down	
Checks before stalling		Parking and security aircraft	
Recovery at the incipient stage		Recording flight details	
Recovery from developed stall – In straight flight			

**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.

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 ..... Examiner's Name .....

CAA Examiner Authorisation No. .... CAA Examiner Authorisation expiry date .....

Date of Signature .....

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

I declare that the information provided on this form is correct.

\* 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.**

**9. SUBMISSION INSTRUCTIONS**

**Send your completed application form to:**

British Microlight Aircraft Association, 6 Somerville Court, Banbury Business Park, Adderbury, Oxon., OX17 3SN.

**You must include in ALL applications:**

- This form. NPPL 102 M
- Personal Flying Logbook
- Medical Declaration or Certificate (Original document required if a medical certificate)
- Any existing Licenses / Certificates for which credit is sought or from which limitations are to be removed if applicable. (Original document required not a copy)
- A copy of the credit allowance sought for the application if applicable.
- **Full colour** proof of identity countersigned by the Chief Flying Instructor completing the course certificate on this application using the words **"I certify that this is a true copy of the identification provided"**. 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. BMAA Fees can be paid at the on-line shop at [www.bmaa.org](http://www.bmaa.org) or by cheque. CAA fee can be paid by cheque or card. Cheques for the CAA must be made payable to the "Civil Aviation Authority" not "CAA". Card payments must be made on the CAA payment form.(Google Search "CAA Form FCS1500".)

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

**PLEASE NOTE: ANY APPLICATION THAT IS RETURNED AS BEING INCOMPLETE OR INCORRECT WILL BE SUBJECT TO A FURTHER CHARGE FOR ADMINISTRATION AND POSTAGE FEE ON RESUBMISSION.**

**8. APPLICATION CHECKED****TO BE COMPLETED BY A REPRESENTATIVE OF THE SCHOOL**

I confirm that I have checked the application and associated documents against the Application Checklist and am satisfied that the application is complete and correct.

Name: ..... Signature: .....

Position in training organisation: ..... Date: .....