

VFC CHECK-RIDE REPORT CESSNA 172SP

PILOT NAME: _____

DATE: _____

LICENCE #: _____

INSTRUCTOR: _____

TOTAL TIME: _____ PIC: _____ LAST YEAR: _____

LAST 24 MONTH RECENCY CHECK (CARS 421.05): _____

CHECK-RIDE CATEGORY:

- ☐ INITIAL CHECK-RIDE
- ☐ 30-DAY CHECK-RIDE (If CANDIDATE FLIES LESS THAN 12 HOURS PER YEAR)
- ☐ 60-DAY CHECK-RIDE (If CANDIDATE FLIES MORE THAN 12 HOURS PER YEAR)
- ☐ ANNUAL CHECK-RIDE
- ☐ 24 MONTH RECENCY FLIGHT REVIEW
- ☐ 60 MONTH RECENCY FLIGHT REVIEW

DOCUMENT VERIFICATION:

- ☐ LICENCE/MEDICAL (PHOTOCOPIED & ATTACHED)
- ☐ C-172SP TYPE TEST (COMPLETED AND ATTACHED)
- ☐ LOGBOOK STAMPED AND (INITIAL AND ANNUAL CHECK-RIDE)
- ☐ SELF-PACED STUDY PROGRAM (COMPLETED AND ATTACHED)

RECOMMENDATIONS:

CHECK-RIDE EXERCISES:

1	PRE-FLIGHT INSPECTION	① ② ③ ④	
2	WEIGHT & BALANCE	① ② ③ ④	
3	PERFORMANCE	① ② ③ ④	
4	TAKE-OFF	① ② ③ ④	
5	DEPARTURE PROCEDURES	① ② ③ ④	
6	STEEP TURNS	① ② ③ ④	
7	SLOW FLIGHT	① ② ③ ④	
8	ARRIVAL STALL	① ② ③ ④	
9	DEPARTURE STALL	① ② ③ ④	
10	FORCED LANDING	① ② ③ ④	
11	ARRIVAL PROCEDURES	① ② ③ ④	
12	CIRCUIT PROCEDURES	① ② ③ ④	
13	LANDING	① ② ③ ④	
14	EMERGENCY PROCEDURES	① ② ③ ④	
15	RADIO COMMUNICATION	① ② ③ ④	
TOTAL MINIMUM PASS MARK (33)			

PERFORMANCE:

☐ SATISFACTORY

☐ REQUIRES MORE TRAINING

COMMENTS:

DOCUMENT VERIFICATION:

☐ MEMBERSHIP CURRENT

☐ GFO UPDATED (LICENCE/MEDICAL/ANNUAL CHECK)

☐ TFBO UPDATED (ADDRESS)