Prerequisites for practical test: Title 14 of the Code of Federal Regulations (14 CFR) part 61, § 61.39(a)(6)(i) and (ii) I certify that (First Name, MI, Last name) has received and logged training time within 2 calendar-months preceding the		Review of deficiencies identified on airman knowledge test: § 61.39(a)(6)(iii), as required. I certify that (First Name, MI, Last name) has demonstrated satisfactory knowledge of the subject areas in which he was deficient on the [applicable] airman knowledge test.					
					preparation for the practical test and he is prepared		
				for the required practica	al test for the issuance of [applicable] certificate.	Signed	Date
				Signed	Date	CFI No.	Expiration Date
CFI No.	Exp. Date						
Pre-solo aeronautical knowledge: § 61.87(b)		Pre-solo flight training: § 61.87(c)(1) and (2).					
I certify that (First Name, MI, Last name)		I certify that (First Name, MI, Last name)					
has satisfactorily completed the pre-solo knowledge test of § 61.87(b) for		has received and logged pre-solo flight training for the maneuvers and					
the [make and model] aircraft. test.		procedures that are appropriate to the [make and model] aircraft. I have					
		determined [he or she] has	s demonstrated satisfactory proficiency and safety				
Signed	Date	on the maneuvers and pro	ocedures required by § 61.87 in this or similar make				
CFI No. Expiration Date		and model of aircraft to be	e flown.				
		Signed	Date				
		CFI No.	Expiration Date				
Solo flight (first 90 calendar-day period): § 61.87(n).		Pre-solo flight training at night: § 61.87(o).					
I certify that (First Name, MI, Last name)		I certify that (First Name	, MI, Last name)				
has received the required training to qualify for solo flying. I have determined		has received flight training at night on night flying procedures that include					
[he or she] meets the applicable requirements of § 61.87(n) and is proficient		takeoffs, approaches, landings, and go-arounds at night at the [airport name]					
to make solo flights in [make and model].		airport where the solo flight will be conducted; navigation training at night in					
		the vicinity of the [airpor	t name] airport where the solo flight will be				
Signed	Date	conducted. This endorsen	nent expires 90 calendar-days from the date the				
CFI No Expiration Date		flight training at night was	s received.				
		Signed	Date				
			Expiration Date				
Solo takeoffs and landings at another airport within 25		Solo flight (each additional 90 calendar-day period): §					
nautical miles (NM): § 61.93(b)(1).		61.87(p).					
I certify that (First Name, MI, Last name)		I certify that (First Name, MI, Last name)					
has received the required training of § 61.93(b)(1). I have determined that [he		has received the required training to qualify for solo flying. I have determined					
or she] is proficient to practice solo takeoffs and landings at [airport name].		that [he or she] meets the applicable requirements of § 61.87(p) and is					
The takeoffs and landings at [airport name] are subject to the following		proficient to make solo fli	ights in [make and model].				
that exit a							
conditions: [List any ap	oplicable conditions or limitations.]						
conditions: [List any ap	oplicable conditions or limitations.]	Signed	Date				
Signed	oplicable conditions or limitations.] Date		DateExpiration Date				