

Pre-solo aeronautical knowledge: § 61.87(b)

I certify that (First Name, MI, Last name)_____ has satisfactorily completed the pre-solo knowledge test of § 61.87(b) for the (Make and Model) _____ aircraft. test.

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

Pre-solo flight training at night: § 61.87(o).

I certify that (First Name, MI, Last name)_____ has received flight training at night on night flying procedures that include takeoffs, approaches, landings, and go-arounds at night at the _____ airport where the solo flight will be conducted; navigation training at night in the vicinity of the _____ airport where the solo flight will be conducted. This endorsement expires 90 calendar-days from the date the flight training at night was received.

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

Solo flight (each additional 90 calendar-day period): § 61.87(p).

I certify that (First Name, MI, Last name)_____ has received the required training to qualify for solo flying. I have determined that (he or she) _____ meets the applicable requirements of § 61.87(p) and is proficient to make solo flights in (Make and Model) _____.

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

Solo cross-country flight: § 61.93(c)(1) and (2).

I certify that (First Name, MI, Last name)_____ has received solo cross-country training. I find (he or she) _____ has met the applicable requirements of § 61.93, and is proficient to make solo cross-country flights in a (Make and Model) _____ aircraft, (category) _____.

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

Repeated solo cross-country flights not more than 50 NM from the point of departure: § 61.93(b)(2).

I certify that (First Name, MI, Last name)_____ has received the required training in both directions between and at both (airport name) _____. I have determined that (he or she) _____ is proficient of § 61.93(b)(2) to conduct repeated solo cross-country flights over that route, subject to the following conditions: _____

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

Solo flight to, from, or at an airport located in Class B airspace: § 61.95(b) and 14 CFR part 91, § 91.131(b)(1).

I certify that (First Name, MI, Last name)_____ has received the required training of § 61.95(b)(1). I have determined that (he or she) _____ is proficient to conduct solo flight operations at (airport name) _____.

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

R-22 solo endorsement: SFAR 73, section 2(b)(3).

I certify that (First Name, MI, Last name)_____, Pilot Certificate Number (Certificate No.) _____ meets the experience requirements of SFAR 73, section 2(b)(3) and has been given training specified by SFAR 73, section 2(a)(3) and the flight training identified in SFAR 73, section 2(b)(5)(iii) to solo the R-22 helicopter

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

R-22 flight instructor endorsement: SFAR 73, section 2(b)(5)(iv).

I certify that (First Name, MI, Last name)_____, CFI Number (CFI number) _____ meets the experience requirements, and has completed the flight training specified by SFAR 73, section 2(b)(5)(i-ii) and (iii)(A-D), and has demonstrated an ability to provide instruction on the general subject areas of SFAR 73, section 2(a)(3) and the flight training identified in SFAR 73, section 2(b)(5)(iii) in a Robinson R-22 helicopter.

Signed _____ Date 03/21/2021
DPE Designation No. _____ Exp. Date _____

R-44 solo endorsement: SFAR 73, section 2(b)(4).

I certify that (First Name, MI, Last name)_____, Pilot Certificate Number (Certificate No.) _____ meets the experience requirements of SFAR 73, section 2(b)(4) and has been given training specified by SFAR 73, section 2(b)(4)(i-iv). (he or she) _____ has been found proficient to solo the R-44 helicopter.

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

Pre-solo flight training: § 61.87(c)(1) and (2).

I certify that (First Name, MI, Last name)_____ has received and logged pre-solo flight training for the maneuvers and procedures that are appropriate to the (Make and Model) _____ aircraft. I have determined (he or she) _____ has demonstrated satisfactory proficiency and safety on the maneuvers and procedures required by § 61.87 in this or similar make and model of aircraft to be flown.

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

Solo flight (first 90 calendar-day period): § 61.87(n).

I certify that (First Name, MI, Last name)_____ has received the required training to qualify for solo flying. I have determined (he or she) _____ meets the applicable requirements of § 61.87(n) and is proficient to make solo flights in (Make and Model) _____.

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

Solo takeoffs and landings at another airport within 25 nautical miles (NM): § 61.93(b)(1).

I certify that (First Name, MI, Last name)_____ has received the required training of § 61.93(b)(1). I have determined that (he or she) _____ is proficient to practice solo takeoffs and landings at (airport name) _____. The takeoffs and landings at (airport name) _____ are subject to the following conditions: _____

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

Solo cross-country flight: § 61.93(c)(3).

I have reviewed the cross-country planning of (First Name, MI, Last name) _____. I find the planning and preparation to be correct to make the solo flight from (origination airport) _____ to (origination airport) _____ via (route) _____ with landings at _____ in a (Make and Model) _____ aircraft on _____.

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

Solo flight in Class B airspace: § 61.95(a).

I certify that (First Name, MI, Last name)_____ has received the required training of § 61.95(a). I have determined (he or she) _____ is proficient to conduct solo flights in (airport name) _____ airspace. (limitations) _____.

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

R-22/R-44 awareness training: SFAR 73, section 2(a)(1) or (2).

I certify that (First Name, MI, Last name)_____, Pilot Certificate Number (Certificate No.) _____ has received the Awareness Training required by SFAR 73, section 2(a)(3)(i-v). test.

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

R-22 pilot-in-command endorsement: SFAR 73, section 2(b)(1)(ii).

I certify that (First Name, MI, Last name)_____, Pilot Certificate Number (Certificate No.) _____ has been given training specified by SFAR 73, section 2(b)(1)(ii)(A-D) for Robinson R-22 helicopters and is proficient to act as pilot in command. An annual flight review must be completed by 3/21/2022 unless the requirements of SFAR 73, section 2(b)(1)(i) are met.

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

Flight review in an R-22 helicopter: SFAR 73, section 2(c)(1) and (3).

I certify that (First Name, MI, Last name)_____, Pilot Certificate Number (Certificate No.) _____ has satisfactorily completed the flight review in an R-22 required by § 61.56 and SFAR 73, section 2(c)(1) and (3), on 03/21/2021.

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

R-44 pilot-in-command endorsement: SFAR 73, section 2(b)(2)(ii).

I certify that (First Name, MI, Last name)_____, Pilot Certificate Number (Certificate No.) _____ has been given training specified by SFAR 73, section 2(b)(2)(ii)(A-D) for Robinson R-44 helicopters and is proficient to act as pilot in command. An annual flight review must be completed by 3/21/2022 unless the requirements of SFAR 73, section 2(b)(2)(i) are met.

Signed _____ Date 03/21/2021
CFI No. _____ Exp. Date _____

R-44 flight instructor endorsement: SFAR 73, section 2(b)(5)(iv)

I certify that (First Name, MI, Last name) _____, holder of CFI
Certificate Number (CFI number) _____ meets the experience requirements and has
completed the flight training specified by SFAR 73, section 2(b)(5)(i-ii) and (iii)(A-D), and has demonstrated
an ability to provide instruction on the general subject areas of SFAR 73, section 2(a)(3) and the flight training
identified in SFAR 73, section 2(b)(5)(iii) in a Robinson R-44 helicopter.

Signed _____ Date 03/21/2021 _____
CFI No. _____ Exp. Date _____

Flight review in an R-44 helicopter: SFAR 73, section 2(c)(2) and (3).

I certify that (First Name, MI, Last name) _____, Pilot Certificate
Number (Certificate No.) _____ has satisfactorily completed the flight review in an R-
44 required by 14 CFR, § 61.56 and SFAR 73, section 2(c)(2) and (3), on 03/21/2021.

Signed _____ Date 03/21/2021 _____
CFI No. _____ Exp. Date _____