

REQUIREMENTS FOR ADDITION OF A GLIDER PILOTS TYPE RATING

| | | | | | |
|---|--|------------------------------|------------------------|-------------|------------|
| Date | | | | | |
| Licence Number | | | | | |
| Please mark with the applicable symbol as indicated | | | YES / NO / N.A. | | |
| CAR 68.05 | | | CSO | LO1 | LO2 |
| 1. | Valid Class 1, Class 2 or Class 4 medical certificate issued in terms of Part 67 | | | | |
| 2. | A copy of the applicant's logbook, duly summarized, showing the required flying experience | | | | |
| 3. | Certified true logbook copies, including career summary and instructor's endorsement | | | | |
| 4. | Strictly no Tippex allowed | | | | |
| 5. | All corrections or alterations made on the form need to be initialled (Line through the incorrect information, make the change and Date & Initial the change) | | | | |
| 6. | The appropriate fee as prescribed in Part 187 | | | | |
| 7. | Hold at least a valid glider pilot licence | | | | |
| 8. | Be the holder of the appropriate glider class rating | | | | |
| Experience in the case of Touring Motor Glider type rating | | | | | |
| 9. | Have completed not less than a minimum total of two flights of which one shall be a solo flight of a minimum of one hour flying time including at least three take-offs and landings during this time | | | | |
| Experience in the case of a Glider Pilot type rating | | | | | |
| 10. | An applicant for the issuing of an additional subclass rating by name, in the applicable class shall have completed not less than— a) minimum total of 1 flight, including 1 solo flight; and b) one flight of minimum 30 minutes flight time. | | | | |
| | An applicant may be credited with dual instruction flights on a touring motor glider, accumulated as the holder of a licence issued in terms of part 62 in the category touring motor gliders, towards the minimum total flights required | | | | |
| Note: | | | | | |
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| SIGNATURE OF CLIENT SERVICE OFFICER | | NAME IN BLOCK LETTERS | | DATE | |
| | | | | | |
| SIGNATURE OF LICENSE OFFICER (LO1) (ISSUER) | | NAME IN BLOCK LETTERS | | DATE | |
| | | | | | |
| SIGNATURE OF LICENSE OFFICER (LO2) (APPROVER) | | NAME IN BLOCK LETTERS | | DATE | |
| | | | | | |
| | | | R | | |
| | | | Receipt number | | |