

GLIDING NEW ZEALAND

Form OPS 3

Application for Qualified Glider Pilot Certificate

Complete all relevant sections in BLOCK LETTERS, and send completed form **with \$10 application fee** to:

Secretary, Gliding New Zealand
PO BOX 451, Wellington

Pilot's surname	Given names	
Address.....		
.....		
.....		
Nationality.....	Date of Birth/...../.....	GNZ #
Contact phone/email	Gliding club	

I hereby certify that all particulars shown on this application are, to the best of my knowledge, true and correct. I declare that I am a "fit and proper person" in accordance with Sections 8 and 9 of the Civil Aviation Act. This means that that I have not had an aviation licence or application rejected or denied, or been convicted of or am presently facing charges of any offences likely to have impact upon my (or others) safety as a pilot, and that I am physically and mentally healthy.

Signature of Applicant Date

Signature of CFI Date

The following sections indicate specific requirements for the Qualified Glider Pilot Certificate as detailed in the NZGA MOAP (Part 2), and all sections must be completed before the Qualified Glider Pilot Certificate can be awarded. An instructor is to sign each item when the applicant has been trained and is proficient, or has produced the required supporting evidence.

<u>Requirement</u>	<u>MOAP section</u>	<u>Instructor</u>	<u>Date</u>
Valid medical status	1.1	.....	.....
"A" Certificate awarded	4.1 (a-d)	.....	.....
"B" Certificate awarded	4.2 (a-d)	.....	.....
25 hours as PIC	4.3.1 (c,d)	.....	.....
Intermediate Post-Solo Training Syllabus	Appendix 2E (d)	.....	.....
70% pass in GNZ written examination	Appendix 2E (e)	.....	.....
Soaring flight of 60 minutes (after release not above 2000 ft AGL)	4.3.1 (f)	.....	.....
Logbook endorsement as "Qualified Glider Pilot"		.....	.....

Official use only			
.....
Date received	Date issued	Number of Cert.	Signature of issuing person