

APPENDIX 7. SAMPLE PILOT'S INSTRUMENT EXPERIENCE SUMMARY

Pilot's Name: _____ **CFI:** _____

Address: _____

Phone(s): _____ **E-mail:** _____

Type of Pilot Certificate(s):

- _____ Private
- _____ Commercial
- _____ Airline transport pilot (ATP)
- _____ Flight instructor

Rating(s):

- _____ Instrument
- _____ Multiengine
- _____ Rotorcraft
- _____ Glider
- _____ Lighter-than-air (LTA)

Experience (pilot):

- _____ Total time
- _____ Last 6 months
- _____ Average hours/month
- _____ Time logged since last instrument proficiency check (IPC)

Experience (aircraft):

Aircraft type(s) you fly _____

Aircraft used most often _____

For this aircraft: Total time _____ Last 6 months _____ Average hours/month _____

Experience (flight environment): Approximately how many hours logged in:

- _____ Day visual flight rules (VFR)
- _____ Day instrument flight rules (IFR)
- _____ Instrument meteorological conditions (IMC)
- _____ Night VFR
- _____ Night IFR
- _____ Approaches
- _____ Approaches to minimums
- _____ Approaches in last 6 months

Type of Flying (external factors): What percentage of your flying is for:

- _____ Pleasure
- _____ Business
- _____ Local
- _____ Cross country

Personal Skills Assessment:

Strengths as a pilot? _____

Areas for improvement? _____

Aviation goals? _____
