



GLIDING AUSTRALIA

THE GLIDING FEDERATION OF AUSTRALIA INC ABN: 82 433 264 48
C4/1-13 THE GATEWAY, BROADMEADOWS, VICTORIA 3047
PHONE +61 393 591 613 EMAIL: returns@glidingaustralia.org

APPLICATION FOR LEVEL 1 INSTRUCTOR TRAINING

DETAILS OF FLYING EXPERIENCE

Name	Date of birth
GFA Number	Nationality
Address	
Phone (home and work)	Email:
Club	
Gliding hours (total)	(Last 12 Months)
Launches (total)	(Last 12 Months)
GPC held – YES / NO (if no, member is ineligible to attend an instructor training course)	
Power flying experience (hrs)	Tug-pilot?
Powered sailplane experience	
Powered sailplane experience	
No of flights in back seat of glider	
AEI or Charter rating? If so, experience (hrs)	

CLUB PREPARATION

I confirm the candidate has been prepared for instructor training, has completed the Integrated Training Program (ITP) Course, and has read and understands the Training Principles and Techniques (TPT) manual and the GPC Trainer guide modules.

I have flown with the candidate and confirm that a satisfactory standard has been attained in the following areas:

- Airmanship,
- Flying accuracy,
- Soaring ability,
- Circuit planning without use of altimeter,
- Approach control,
- Consistently good two-point landings,
- Stalling,
- Spinning, and
- launch emergencies.

Name of CFI	GFA No.
Club	
Signature	Date

CFI TO FORWARD THIS APPLICATION FORM TO THE RMO.