

# Aviation Center



APPLICANT INFORMATION	NAME (First, Middle, Last)				PERMANENT MAILING ADDRESS NUMBER AND STREET, P.O. BOX ECT...					
	SOC. SEC. NO.		DATE OF BIRTH		HEIGHT		WEIGHT			
	HAIR	EYES	SEX	NATIONALITY						
	PLACE OF BIRTH:			DO YOU READ, SPEAK AND UNDERSTAND ENGLISH?						
	DO YOU NOW HOLD OR HAVE YOU EVER HELD AN FAA PILOT CERTIFICATE?				GRADE		CERTIFICATE NUMBER		DATE ISSUED	
	DO YOU HOLD A MEDICAL CERTIFICATE?			CLASS OF CERTIFICATE?		DATE ISSUED		NAME OF EXAMINER		

EMPLOYER: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ BUS: PHONE \_\_\_\_\_

PILOT CERTIFICATE NUMBER: \_\_\_\_\_ RATINGS: \_\_\_\_\_

FLIGHT EXPERIENCE:

	A-SEL	A-MEL	SES	INST	X-C	NITE	RETRAC	LAST 90 DAYS
TOTAL								
PIC								

Date of last BFR \_\_\_\_\_ Instrument last 90 days \_\_\_\_\_

Approaches last 90 days \_\_\_\_\_

List any accidents or violations \_\_\_\_\_

I certify that all statements made by me on this form are true.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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For Roisen checkout pilot use.

- \_\_\_\_\_ Aircraft knowledge form for each type complete.
- \_\_\_\_\_ Renter pilot is competent to exercise the privileges of his \_\_\_\_\_ (grade) certificate in Roisen aircraft.
- \_\_\_\_\_ Renter pilot is competent to fly IFR in Roisen aircraft.
- \_\_\_\_\_ Pilot Certificate, Medical, FCC License photocopied on reverse.
- \_\_\_\_\_ All applicable Roisen procedures (keys, parking, fuel, etc.) explained to new renter pilot.

Checkout Pilot \_\_\_\_\_ Date \_\_\_\_\_