



ΕΛΛΗΝΙΚΗ ΔΗΜΟΚΡΑΤΙΑ  
ΥΠΗΡΕΣΙΑ ΠΟΛΙΤΙΚΗΣ ΑΕΡΟΠΟΡΙΑΣ  
HELLENIC REPUBLIC  
HELLENIC CIVIL AVIATION AUTHORITY  
MEMBER OF EASA



HCAA REFERENCE No.:

FSD REFERENCE No.:  
(HCAA USE ONLY- Αριθμοί Πρωτοκόλλου /Χρήση ΥΠΑ μόνο )

FORM No. 320

## CPL (A) - SKILL TEST

**Name/Surname/Father's Name:**

Όνομα/Επίθετο/Όνομα πατρός

**ID/Passport No.:**

Αριθ.ΑΤ/Διαβατηρίου

**Date of birth:**

Ημερ.γέν.:

**Place of birth:**

Τόπος γέν.:

**Nationality:**

Εθνικότητα:

**Private Address:**

Διεύθ. Κατοικίας:

**Post code:**

Ταχ. Κώδ.:

**City/Country:**

Πόλη/Χώρα:

**Phone/mobile:**

Τηλ. σταθ./κιν. :

**Phone/fax office:**

Τηλ./φάξ εργασίας:

**e-mail and additional contact info:**

Ηλεκτρονική διεύθ./ επιπρόσθετες πληρ. επικοινωνίας:

**Signature of applicant:**

Υπογραφή  
αιτούντος/αιτούσας:

**Grand total flight hours:**

Γενικό σύνολο ωρών:

**PIC hours:**

Ωρες κυβ.:

**COPI hours:**

Ωρες συγκυβ.:

**Type/Licence number:**

Τύπος/αριθμός αδείας:

**Med. Certificate Class/ Exp. Date:**

Κλάση/Ημερομ.λήξης πιστοπ.υγείας:

**HCAA USE ONLY REMARKS** (Χρήση ΥΠΑ μόνο, παρατηρήσεις)

INSPECTING  
OFFICER

AVIATION SAFETY  
INSPECTOR

LICENSING DEP. DIRECTOR

FLIGHT STANDARDS DEP. DIRECTOR

## ΥΠΕΥΘΥΝΗ ΔΗΛΩΣΗ - DECLARATION

### A.

Με ατομική μου ευθύνη και γνωρίζοντας τις κυρώσεις (1), που προβλέπονται από τις διατάξεις της παρ. 6 του άρθρου 22 του Ν. 1599/1986, δηλώνω ότι τα περιεχόμενα στην παρούσα αίτησή μου στοιχεία είναι ακριβή (2) και αληθή (3) και έχω πληρώσει τα αντίστοιχα τέλη.

ΣΗΜΕΙΩΣΗ:

(1) «Όποιος εν γνώσει του δηλώνει ψευδή γεγονότα ή αρνείται ή αποκρύπτει τα αληθινά με την έγγραφη υπεύθυνη δήλωση του άρθρου 8, τιμωρείται με φυλάκιση τουλάχιστον τριών μηνών. Εάν ο υπαίτιος αυτών των πράξεων σκόπευε να προσπορίσει στον εαυτό του ή σε άλλον περιουσιακό όφελος βλάπτοντας τρίτον ή σκόπευε να βλάψει άλλον, τιμωρείται με κάθειρξη μέχρι 10 ετών.

(2) Η ακρίβεια των στοιχείων που υποβάλλονται με αυτή τη δήλωση μπορεί να ελεγχθεί με βάση το αρχείο άλλων υπηρεσιών (άρθρο 8 παρ. 4 Ν. 1599/1986).

(3) Οιαδήποτε ψευδής παρουσίαση ή δήλωση ή απόκρυψη πληροφοριών στην παραπάνω αίτηση θα έχει ως συνέπεια την απόρριψή της, την ποινική δίωξη των υπευθύνων κατά το άρθρο 42 ή 220 του Ποινικού Κώδικα και την ανάκληση από την ΥΠΑ οποιουδήποτε ισχύοντος αεροπορικού Πτυχίου ή Πιστοποιητικού Υγείας.

(4) Ο Ευρωπαϊκός Κανονισμός (ΕΥ) Νο. 1178/2011 όπως τροποποιήθηκε, απαιτεί όπως όλες οι άδειες/πτυχία του ενδιαφερομένου να διεκπεραιώνονται μόνο από την Αρχή Πολιτικής Αεροπορίας που κατέχει τα ιατρικά δεδομένα αυτού. (Part MED.A.030 and Part FCL.015).

**Εάν τα ιατρικά σας δεδομένα δεν βρίσκονται στην Ελληνική Υπηρεσία Πολιτικής Αεροπορίας, η αίτησή σας θα απορριφθεί.**

On my own responsibility and knowing the presumable penalties (1), by the paragraph 6 of the article 22 of the N.1599/1986, I declare that the included elements in my present application are accurate (2) and true (3) and I have paid the applicable fees.

NOTE:

(1) "Whoever, under his own knowledge, declares untrue facts or denies or withholds the true facts within his/her written declaration under the article 8, he/she will be punished with imprisonment of at least three months. If the responsible of these actions intended, for his own benefit or other's benefit, to draw financial profit harming third person or he/she intended to harm other, he/she will be punished with imprisonment for a term up to 10 years.

(2) The accuracy of the elements that are submitted with this declaration can be checked on the basis of a check into other agency's archives (article 8 paragraphs 4 N.1599/1986).

(3) Any untrue presentation or declaration or dissimulation of information within the above application will have as a consequence its rejection, the penal prosecution of responsible persons according to the article 42 or 220 of the Penal Code and the revocation of every valid aviation licence or Medical Certificate by the Hellenic CAA.

(4) European Commission Regulation (EU) No. 1178/2011 as amended requires that an individual has all of their licences administered by the National Aviation Authority that holds their medical records.

(Part MED.A.030 and Part FCL.015).

**If your medical records are not held by the HCAA, your application will be rejected.**

### B.

Επιπρόσθετες πληροφορίες σχετικά με την αίτησή σας/Additional information concerning your application:

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Ο / Η Δηλών (ούσα)

Name of Applicant: .....

Υπογραφή

Signature: .....

Ημερομηνία

Date: .....

CPL (A)-SKILL TEST	APPLICATION - REPORT	Applicant's licence number:
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☐ initial skill test combined with first CR/TR      ☐ repetition of failed skill test, from date: \_\_\_\_\_

☐ initial skill test combined with CR/TR prof. check      ☐ repetition of partial passed skill test, from date: \_\_\_\_\_

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**Instructor**

last name: \_\_\_\_\_ first name: \_\_\_\_\_

licence number: \_\_\_\_\_ signature of flight instructor: \_\_\_\_\_

The ATO confirms that the candidate has been trained according to the approved syllabus and assures the level of proficiency required.

**ATO**

name: \_\_\_\_\_ registration number: \_\_\_\_\_

name of chief flight instructor: \_\_\_\_\_ licence number: \_\_\_\_\_

location & date: \_\_\_\_\_ signature of chief flight instructor: \_\_\_\_\_

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### 1 Details of flight

date: \_\_\_\_\_ type of aeroplane: \_\_\_\_\_ registration: \_\_\_\_\_ class: \_\_\_\_\_ TR: \_\_\_\_\_

departure/destination: \_\_\_\_\_ block-off: \_\_\_\_\_ block-on: \_\_\_\_\_ block time: \_\_\_\_\_ # of landings: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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### 2 Result of skill test

\*delete as necessary

Applicant's signature

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### 3 Remarks

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**Examiner:**

last name: \_\_\_\_\_ first name: \_\_\_\_\_

examiner authorisation: \_\_\_\_\_ licence number: \_\_\_\_\_

location and date: \_\_\_\_\_ signature of flight examiner: \_\_\_\_\_

CPL (A)-SKILL TEST	APPLICATION - REPORT	Applicant's licence number:																
<p><b>Instruction / experience report</b></p> <p>A copy of the relevant logbook pages (flight experience &amp; STD pages) showing the confirmed completion of the flight instruction must be attached to this form. Please make sure to note your licence number together with your signature at the bottom of the pages.</p> <p><b>Summary of conditions and flying experience before CPL(A) skill test</b></p> <p>a) Applicant minimum age: 18 years</p> <p>b) Enclose official printout of criminal record file issued by state of residence (maximum 3 months old) <input type="checkbox"/></p> <p>c) Pilot licence (medical or PPL) valid until: _____</p> <p>d) EASA Medical class 1 (Part MED.A.030 (f)) valid until: _____</p> <p>e) Theoretical examination CPL(A) passed date: _____</p> <p>f) Night qualification completed entry in licence: _____ or confirmed with form 60.611 date: _____</p> <p>g) Before starting CPL modular course applicant shall have completed:</p> <p style="padding-left: 150px;">(150 HRs flight time): hours: _____</p> <p>h) Maximum PIC hours Credits (Appendix 3, E, 12 (e)):</p> <p style="padding-left: 20px;">(i) 30 PIC hours on helicopters if holding a PPL(H) ; or</p> <p style="padding-left: 20px;">(ii) 100 PIC hours on helicopters if holding a CPL(H) ; or</p> <p style="padding-left: 20px;">(iii) 30 PIC hours on TMG or sailplanes; or</p> <p style="padding-left: 20px;">(iv) 30 PIC hours on airships if holding a PPL(As) ; or</p> <p style="padding-left: 20px;">(v) 100 PIC hours on airships if holding a CPL(As) ;</p> <p style="padding-left: 20px;">A copy of the relevant logbook pages must be submitted. hours: _____</p> <p>General flight experience: (MNM 200 HR) hours: _____</p> <p>i) Flight experience as PIC (MNM 100 HR) hours: _____</p> <p style="padding-left: 40px;">of which cross country VFR as PIC (MNM 20 HR) hours: _____</p> <p style="padding-left: 40px;">of which 540 Km cross country flight:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Leg 1</td> <td style="width: 15%;">DEP _____</td> <td style="width: 15%;">DEST _____</td> <td style="width: 15%;">KM _____</td> </tr> <tr> <td>Leg 2</td> <td>DEP _____</td> <td>DEST _____</td> <td>KM _____</td> </tr> <tr> <td>Leg 3</td> <td>DEP _____</td> <td>DEST _____</td> <td>KM _____</td> </tr> <tr> <td style="text-align: right;">total</td> <td colspan="2">(MNM great circle distance 540 Km)</td> <td>KM _____</td> </tr> </table> <p>j) Dual visual flight instruction (MNM 15 HR) hours: _____</p> <p><b>For Pilots without IR:</b></p> <p>k) Dual instrument flight instruction (MNM 10 HR) hours: _____</p> <p style="padding-left: 40px;">of which instruction time BITD, FNPT I or II, FFS (MAX 5 HR) hours: _____</p> <p><b>Minimum 5 HR instruction i) or j) above must be in an aeroplane fitted with 4 seats, VP and RU.</b></p> <p style="padding-left: 150px;">(MNM 5 HR) hours: _____</p>			Leg 1	DEP _____	DEST _____	KM _____	Leg 2	DEP _____	DEST _____	KM _____	Leg 3	DEP _____	DEST _____	KM _____	total	(MNM great circle distance 540 Km)		KM _____
Leg 1	DEP _____	DEST _____	KM _____															
Leg 2	DEP _____	DEST _____	KM _____															
Leg 3	DEP _____	DEST _____	KM _____															
total	(MNM great circle distance 540 Km)		KM _____															

<b>CPL (A)-SKILL TEST</b>	<b>APPLICATION - REPORT</b>	<b>Applicant's licence number:</b>
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Use of checklist, airmanship, A/C limitations must be respected in all sections

<b>Section 1</b>		<b>Pre-flight operations &amp; departure</b>			
		1 attempt		2 attempt	
		pass	fail	pass	fail
<b>a</b>	Pre-flight, including: Flight planning, Documentation, Mass & balance determination, Weather brief, NOTAM				
<b>b</b>	Aeroplane inspection & servicing				
<b>c</b>	Taxiing & take-off				
<b>d</b>	Performance considerations and trim				
<b>e</b>	Aerodrome and traffic pattern operations				
<b>f</b>	Departure procedure, altimeter setting, collision avoidance (lookout)				
<b>g</b>	ATC liaison - compliance, R/T procedures				
please delete as necessary		passed		failed	
		examiner's signature			

<b>Section 2</b>		<b>General airwork</b>			
		1 attempt		2 attempt	
		pass	fail	pass	fail
<b>a</b>	Control of the aeroplane by external visual reference, including straight and level, climb, descent, lookout				
<b>b</b>	Flight at critically low airspeed including recognition of and Recovery from incipient and full stalls				
<b>c*</b>	Turns, including Turns in landing configuration. Steep turns 45° bank				
<b>d</b>	Flight at critically high airspeed including recognition of and Recovery from spiral dives				
<b>e</b>	Flight by reference solely to instruments including:				
	(i) Level flight, cruise configuration, control of heading, altitude and airspeed				
	(ii) Climbing and descending turns with 10°-30° bank				
	(iii) Recoveries from unusual attitudes				
	(iv)* Limited panel instruments				
<b>f</b>	ATC liaison - compliance, R/T procedures				
please delete as necessary		passed		failed	
		examiner's signature			

\* May be performed in a Flight Simulator or FNPT II if certified for this purpose

<b>CPL (A)-SKILL TEST</b>	<b>APPLICATION - REPORT</b>	<b>Applicant's licence number:</b>
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Use of checklist, airmanship, A/C limitations must be respected in all sections

<b>Section 3</b>		<b>En-route procedures</b>				
		1 attempt		2 attempt		
		pass	fail	pass	fail	
<b>a</b>	Control of the aeroplane by external visual reference, including Cruise configuration Range / Endurance considerations					
<b>b</b>	Orientation, Map reading					
<b>c</b>	Altitude, speed, heading control, lookout					
<b>d</b>	Altimeter setting. ATC liaison - compliance, R/T procedures					
<b>e</b>	Monitoring of flight progress, flight log, fuel usage, assessment of track error and re-establishment of correct tracking					
<b>f</b>	Observation of weather conditions, assessment of trends, diversion planning					
<b>g</b>	Tracking, positioning (NDB or VOR), identification of facilities (instrument flight). Implementation of diversion plan to alternate aerodrome (visual flight)					
<b>please delete as necessary</b>		<b>passed</b>		<b>failed</b>		examiner's signature

<b>Section 4</b>		<b>Approach and landing procedures</b>				
		1 attempt		2 attempt		
		pass	fail	pass	fail	
<b>a</b>	Arrival procedures, altimeter setting, checks, lookout					
<b>b</b>	ATC liaison - compliance, R/T procedures					
<b>c</b>	Go-around action from low height					
<b>d</b>	Normal landing, Crosswind landing (if suitable conditions)					
<b>e</b>	Short field landing					
<b>f</b>	Approach and landing with idle power (single engine aeroplane only)					
<b>g</b>	Landing without use of flaps					
<b>h</b>	Post flight actions					
<b>please delete as necessary</b>		<b>passed</b>		<b>failed</b>		examiner's signature

<b>CPL (A)-SKILL TEST</b>	<b>APPLICATION - REPORT</b>	<b>Applicant's licence number:</b>
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Use of checklist, airmanship, A/C limitations must be respected in all sections

<b>Section 5*</b>		<b>Abnormal &amp; emergency procedures</b>			
<i>This section may be combined with sections 1 through 4</i>		<b>1 attempt</b>		<b>2 attempt</b>	
		<b>pass</b>	<b>fail</b>	<b>pass</b>	<b>fail</b>
<b>a</b>	Simulated engine failure after take-off (at a safe altitude), fire drill				
<b>b</b>	Equipment malfunctions including alternative landing gear extension, electrical and brake failure				
<b>c</b>	Forced landing (simulated)				
<b>d</b>	ATC liaison - compliance, R/T procedures				
<b>e</b>	Oral questions				
<i>please delete as necessary</i>		<b>passed</b>		<b>failed</b>	
		<small>examiner's signature</small>			

<b>Section 6*</b>		<b>Simulated asymmetric flight and relevant class/type items</b>			
<i>This section may be combined with sections 1 through 5</i>		<b>1 attempt</b>		<b>2 attempt</b>	
		<b>pass</b>	<b>fail</b>	<b>pass</b>	<b>fail</b>
<b>a</b>	Simulated engine failure during take-off (at a safe altitude unless carried out in FFS or FNPT II)				
<b>b</b>	Asymmetric approach and go-around				
<b>c</b>	Asymmetric approach and full stop landing				
<b>d</b>	Engine shut down and restart				
<b>e</b>	ATC liaison - compliance, R/T procedures				
<b>f</b>	As determined by the FE - any relevant items of the class/type rating skill test to include, if applicable:				
	(i) Aeroplane systems including handling of autopilot				
	(ii) Operation of pressurisation system				
	(iii) Use of de-icing and anti-icing system				
<b>g</b>	Oral questions				
<i>please delete as necessary</i>		<b>passed</b>		<b>failed</b>	
		<small>examiner's signature</small>			

\* May be performed in a Flight Simulator or FNPT II if certified for this purpose