

AND CLASS		CONDITIONS OF FLIGHT				FLIGHT SIMULATOR	TYPE OF PILOTING TIME								TOTAL DURATION OF FLIGHT		
		NIGHT	ACTUAL INSTRUMENT		SIMULATED INSTRUMENT (HOOD)		CROSS COUNTRY		SOLO		DUAL RECEIVED		PILOT IN COMMAND				
														6		6	
														2	4	2	4
														9		9	
														6		6	
														1	1	1	1
														2		2	
														1	3	1	3
														1	0	1	0
														1	1	1	1
														3		3	
														1	0	1	0
														/	/	/	/
														/	/	/	/
														10	5	10	5
														3	7		
														48	5	17	2
														100	6	41	6
														52	2	17	2
														100	6	52	1
																144	4



#1 SFAR 73 AWARENESS TRAINING

I certify that John Marcotte has received the awareness training as specified by SFAR 73 § 2(a)(3)(i-v) for the Robinson R22 and R44

Signature [redacted] Date 12-3-14
Name [redacted] Cert# [redacted] Exp. 8/16



TSA ALIEN FLIGHT TRAINING RULE

I certify that John Marcotte has presented me evidence of U.S. citizenship by showing me the evidence that is checked and enclosed in his/her student folder establishing the he/she is a U.S. citizen or national in accordance with 49 CFR 1552.3(h).

Signature [redacted] Date 12-3-14
Name [redacted] Cert# [redacted] Exp. 8/16

#4 SOLO FLIGHT (90 DAY)

I certify that John Marcotte has received the required training to qualify for solo flight. I have determined that he/she meets the applicable requirements of § 61.187(n) & is proficient to make solo flights in the R44 R22. This endorsement is valid for 90 days & is subject to the conditions & restrictions as stated in the Upper Merit Aviation School Safety Procedures.

Signature [redacted] Date 1-11-15
Name [redacted] Cert# [redacted] Exp. 8/16

SFAR 73 OF 61 Solo Robinson R-22

fy that John Marcotte meets the experience requirements of 2(b)(3)(i-v). He/She has been found ment to solo the R-22. Expires 12-12-09

n Harris [redacted] CFI [redacted]
July 2010

ENDORSEMENTS



#11 PILOT IN COMMAND LESS THAN 200/50 R22/R44

I certify that JOHN MARCOTTE has met the training requirements specified by SFAR 73 § 2(b)(1)(i) [or 2(b)(2)(ii) if for the R44] and find he/she to be proficient to act as pilot in command in the Robinson R 44. A flight review must be completed within 12 calendar months unless the requirements of SFAR 73 § 2(b)(1)(i) [or 2(b)(2)(ii) if for the R44] are met.

Signature [redacted] Date 1-11-15
Name [redacted] Cert# [redacted] Exp. 8/14

Tailwheel airplane: §61.31(i)

given [redacted] [First name, MI, Last name]
holder of pilot certificate # [redacted] [certificate number]
er], flight training in at least normal and crosswind takeoffs and
gs; wheel landings (if appropriate), and go-around procedures
ilwheel airplane, and find him/her proficient in the operation of
wheel airplane.

d [redacted] Date [redacted]
Expiration [redacted]

Additional Endorsement



TRAINING WITHIN 2 CALENDAR MONTHS OF PRACTICAL EXAM

I certify that JOHN MARCOTTE has received the required flight training 61.39(a)(1) for the practical test in a helicopter in the preceding 2 calendar months.

Signature [redacted] Date 2-6-15
Name [redacted] Cert# [redacted] Exp. 8/14

d [redacted] Date [redacted]
Expiration [redacted]

Flight Review: §61.56

[First name, MI, Last name]
of pilot certificate # [redacted] [certificate number]
satisfactorily completed the flight review required by §61.56 [date].

Signed [redacted] Date [redacted]
CFI # [redacted] Expiration [redacted]

Flight Review: §61.56

[First name, MI, Last name]
of pilot certificate # [redacted] [certificate number]
satisfactorily completed the flight review required by §61.56 [date].

Signed [redacted] Date [redacted]
CFI # [redacted] Expiration [redacted]

Flight Review: §61.56

[First name, MI, Last name]
of pilot certificate # [redacted] [certificate number]
satisfactorily completed the flight review required by §61.56 [date].

Signed [redacted] Date [redacted]
CFI # [redacted] Expiration [redacted]

Training and
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Names of
and model

Class B air-

First name, MI,
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ENDORSEMENTS

**TULSA HELICOPTER
FLIGHT ACADEMY**

#12 PRIVATE PILOT PRACTICAL TEST

I certify that JOHN MARCOTTE has received the required training of § Part 141 Appendix B. I have determined that he/she is prepared for the Private Pilot Rotorcraft/Helicopter Practical Test.

Signature [Redacted] Date 6/30/14
Name [Redacted] Cert# [Redacted] Exp. 8/14

**TULSA HELICOPTER
FLIGHT ACADEMY**

FAA KNOWLEDGE TEST REVIEW

John Marcotte has satisfactory knowledge of the subject areas in which he/she was shown to be deficient by the FAA airman knowledge test report.

Signature [Redacted] Date 1-10-15
Name [Redacted] Cert# [Redacted] Exp. 8/14
CFI

Signature [Redacted] Date [Redacted]
CFI # [Redacted] Expiration [Redacted]

Private pilot flight proficiency: §61.107(b)

I certify that I have given [Redacted] (First name, MI, Last name) the ground and flight training required §61.107(b) () [(1) through (8) as appropriate], and find him/her proficient to perform each area of operation safely as a private pilot, and that he/she is prepared for the required practical test.

Signed [Redacted] Date [Redacted]
CFI # [Redacted] Expiration [Redacted]

C — Complex airplane: §61.31(e)

I certify that I have given ground and flight training in a complex airplane to [Redacted] (First name, MI, Last name), holder of pilot certificate # [Redacted] (certificate number), and find him/her proficient in the operation and systems of a complex airplane.

Signed [Redacted] Date [Redacted]
CFI # [Redacted] Expiration [Redacted]

ENDORSEMENTS

Each solo cross-country flight: §61.93(d)

After reviewing the cross-country planning of _____

[First name, MI, Last name], I attest that the preflight planning and preparation is correct, and that he/she is prepared to make the solo flight safely under the known circumstances from _____

[location] to _____ [destination] via _____

[route of flight] with landings at _____ [names of applicable airports] in a _____ [make and model aircraft] on _____ [date].

Limitations — §61.89(a)(8): _____

Signed _____ Date _____
CFI # _____ Expiration _____

Each solo cross-country flight: §61.93(d)

After reviewing the cross-country planning of _____

[First name, MI, Last name], I attest that the preflight planning and preparation is correct, and that he/she is prepared to make the solo flight safely under the known circumstances from _____

[location] to _____ [destination] via _____

[route of flight] with landings at _____ [names of applicable airports] in a _____ [make and model aircraft] on _____ [date].

Limitations — §61.89(a)(8): _____

Signed _____ Date _____
CFI # _____ Expiration _____#7 SOLO TO, FROM, OR AT AN AIRPORT LOCATED IN CLASS D AIRSPACE
(90 DAY)I certify that John Marcotte has received the required ground and flight training in accordance with § 61.95(a). I have found he/she to be proficient to conduct solo flight operations at KRVS airport.Signature _____ Date 1-30-15Name _____ Cert# _____ CFI Exp. 8/14flight to, from, or at an airport located within Class B air-
§§61.95(b) and 91.131(b)(1)

given _____ [First name, MI, name] the ground and flight training required by §61.95(b), and him/her proficient to conduct solo flight operations at _____ [name of airport].

Signed _____ Date _____
CFI # _____ Expiration _____

#12 PRIVATE PILOT PRACTICAL TEST

I certify that John Marcotte has received the required ground and flight training of § Part 141 Appendix B. I have determined the subject is prepared for the Private Pilot/Balloon/Helicopter Practical Test.

Signature _____ Date _____

Name _____



FAA KNOWLEDGE TEST REVIEW

I certify that John Marcotte has satisfactory knowledge of the subject areas in which he/she was shown to be deficient by the FAA airman knowledge test report.

Signature _____ Date _____

Name _____

CFI # _____ Expiration _____

ENDORSEMENTS



#8 INITIAL SOLO CROSS-COUNTRY FLIGHT

I certify that John Marcotte has received the required solo cross country training. I find that he/she has met the applicable requirements of § 61.93, and is proficient to make solo cross country flights in a R-44 helicopter.

Signature [Signature] Date 12-31-14
Name [Redacted] Cert# [Redacted] Exp. 8/16

Each solo cross-country flight: §61.93(d)

After reviewing the cross-country planning of _____
[First name, MI, Last name], I attest that the preflight planning and preparation is correct, and that he/she is prepared to make the solo flight safely under the known circumstances from _____
[location] to _____ [destination] via _____
[route of flight] with landings at _____ [names of applicable airports] in a _____ [make and model aircraft] on _____ [date].
Limitations — §61.89(a)(8): _____

Signed _____ Date _____
CFI # _____ Expiration _____

h solo cross-country flight: §61.93(d)

After reviewing the cross-country planning of _____
[First name, MI, Last name], I attest that the preflight planning and preparation is correct, and that he/she is prepared to make the solo flight safely under the known circumstances from _____
[location] to _____ [destination] via _____
[route of flight] with landings at _____ [names of applicable airports] in a _____ [make and model aircraft] on _____ [date].
Limitations — §61.89(a)(8): _____

Signed _____ Date _____
CFI # _____ Expiration _____

Each solo cross-country flight: §61.93(d)

After reviewing the cross-country planning of _____
[First name, MI, Last name], I attest that the preflight planning and preparation is correct, and that he/she is prepared to make the solo flight safely under the known circumstances from _____
[location] to _____ [destination] via _____
[route of flight] with landings at _____ [names of applicable airports] in a _____ [make and model aircraft] on _____ [date].
Limitations — §61.89(a)(8): _____

Signed _____ Date _____
CFI # _____ Expiration _____

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ENDORSEMENTS



#5 SOLO TAKEOFFS & LANDINGS AT OTHER AIRPORTS WITHIN 25 NM

I certify that John Marcotte has received the required training of §61.93 (b)(1). I have determined that he/she is proficient to practice solo takeoffs and landings at KEVS. The takeoffs and landings at KEVS are subject to the conditions and restrictions as stated in the Upper Limit Aviation School Safety Procedures.

Signature [redacted] Date 12-31-14
Name [redacted] Cert [redacted] Exp. 9/14

Repeated solo cross-country flights not more than 50 nm from the point of departure: §61.93(b)(2)

I have given _____ [First name, MI, Last name] flight training in both directions over the route between _____ [home base] and _____ [airport name], including entering and exiting the traffic pattern, takeoffs, and landings at the airports to be used, and find him/her proficient to conduct repeated solo cross-country flights over that route, subject to the following conditions:

Signed _____ Date _____
CFI # _____ Expiration _____

Landings and takeoffs at another airport within 25 nm: (b)(1)

given the flight training required by §61.93(b)(1) to: _____ [First name, MI, Last name]
and him/her proficient to practice landings and takeoffs at _____ [airport name]. Landings and takeoffs at _____ [airport name] are authorized to the following conditions:

Repeated solo cross-country flights not more than 50 nm from the point of departure: §61.93(b)(2)

I have given _____ [First name, MI, Last name] flight training in both directions over the route between _____ [home base] and _____ [airport name], including entering and exiting the traffic pattern, takeoffs, and landings at the airports to be used, and find him/her proficient to conduct repeated solo cross-country flights over that route, subject to the following conditions:

Signed _____ Date _____
CFI # _____ Expiration _____



#8 INITIAL SOLO CROSS-COUNTRY FL

I certify that John Marcotte has received the country training. I find that he/she has met the applicable § 61.93, and is proficient to make solo cross country flights X-44 helicopter.

Signature [redacted] Date _____
Name [redacted] Cert # [redacted]

Each solo cross-country flight: §61.93(d)

After reviewing the cross-country planning of _____ [First name, MI, Last name], I attest that the preflight preparation is correct, and that he/she is prepared to fly safely under the known circumstances from _____ [location] to _____ [destination] via _____ [route of flight] with landings at _____ [applicable airports] in a _____ [aircraft] on _____ [date].

Limitations — §61.89(a)(8): _____

Signed _____ Date _____
CFI # _____ Expiration _____

ENDORSEMENTS



#3 PRESOLO AERONAUTICAL KNOWLEDGE AND FLIGHT TRAINING

I certify that John Marcorre has satisfactorily completed the presolo knowledge exam per § 61.87(b), received the required presolo training required by § 61.87(c), and has demonstrated the proficiency of § 61.87(f) and is proficient to solo the Bell 206

Signature [Redacted] Date 1-11-15

Name [Redacted] Cert# [Redacted] Exp. 8/14

#2 FOR STUDENTS/NON-RATED PILOTS TO SOLO A ROBINSON R22/R44
PER SFAR 73

I certify that John Marcorre has met the experience requirements of § 61.87(d)(3) and has been given training specified by SFAR 73 paragraph 2(b)(3)(i-iv). He/She has been found proficient to solo the Bell 206

Signature [Redacted] Date 1-11-15

Name [Redacted] Cert# [Redacted]

CFI # [Redacted] Expiration [Redacted]

Solo flight training: §61.87(c)

given [Redacted] [First name, MI, Last name]
the flight training required by §61.87(c) in a [Redacted]
[make and model aircraft]. He/She has demonstrated proficiency in the applicable maneuvers and procedures listed in §61.87(d) through (k), as appropriate, and is proficient to make safe solo flights in a [Redacted] [make and model aircraft].

Limitations — §61.89(a)(8): [Redacted]

Signed [Redacted] Date [Redacted]
CFI # [Redacted] Expiration [Redacted]

Solo flight training at night: §61.87(c) and (m)

given [Redacted] [First name, MI, Last name]
the flight training required by §61.87(c) and (m) in a [Redacted]
[make and model aircraft]. He/She has demonstrated proficiency in the applicable maneuvers and procedures listed in §61.87(d) through (k), as appropriate, and is proficient to make safe solo flights at night in a [Redacted] [make and model aircraft].

Limitations — §61.89(a)(8): [Redacted]

Signed [Redacted] Date [Redacted]
CFI # [Redacted] Expiration [Redacted]

END

Solo (each additional 90-day period): §61.87(n)

I have given [Redacted] [First name, Last name]
the training required by §61.87(n). He/She has met the requirements of §61.87(n)(1) and is proficient to make safe solo flights in a [Redacted] [make and model aircraft].

Limitations — §61.89(a)(8): [Redacted]

Signed [Redacted] Date [Redacted]
CFI # [Redacted] Expiration [Redacted]

Solo (each additional 90-day period): §61.87(n)

I have given [Redacted] [First name, Last name]
the training required by §61.87(n). He/She has met the requirements of §61.87(n)(1) and is proficient to make safe solo flights in a [Redacted] [make and model aircraft].

Limitations — §61.89(a)(8): [Redacted]

Signed [Redacted] Date [Redacted]
CFI # [Redacted] Expiration [Redacted]