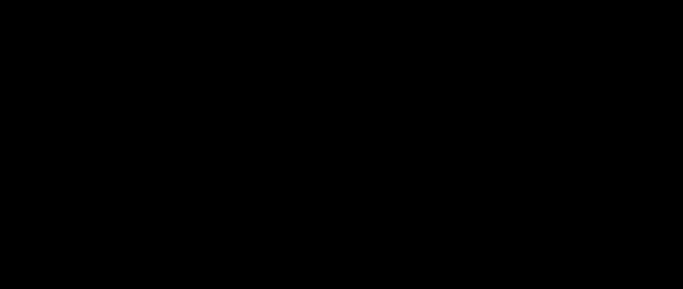


Fold Here

CONDITIONS OF ISSUE: This certificate shall be in the personal possession of the airman at all times while exercising the privileges of his or her airman certificate. The issuance of a medical certificate by an Aviation Medical Examiner may be reversed by the FAA within 60 days. Section 61.19 of Title 14 of the Code of Federal Regulations (14 CFR part 61) sets forth the duration of a student pilot certificate. Unless otherwise limited, the duration of a medical certificate is set forth in 61.23. The holder of this certificate is governed by the provisions of 61.53 relating to medical deficiency (14 CFR part 61).

CERTIFICATED INSTRUCTOR'S ENDORSEMENT FOR STUDENT PILOTS

I certify that the holder of this certificate has met the requirements of the regulations and is competent for the following:

	Date	Make and Model of Aircraft	Instructor's Signature	Instructor's Cert.	
				No.	Exp. Date
A. To Solo The Following Aircraft	7/9/16	Cessna CE-172		3034027 CFE	5/17
B. To Make Solo cross-country Flights		Aircraft Category			
		Airplane			
		Glider			
		Rotorcraft			

Passenger-Carrying Prohibited
STUDENT PILOT CERTIFICATE

08/10/2016 23:10

DATE 2016	RECORDING TACH TIME	TODAYS FLIGHT	TOTAL TIME IN SERVICE	DESCRIPTION OF INSPECTIONS, TESTS, REPAIRS AND ALTERATIONS ENTRIES MUST BE ENDORSED WITH NAME, RATING AND CERTIFICATE NUMBER OF MECHANIC OR REPAIR FACILITY. (SEE BACK PAGES FOR OTHER SPECIFIC ENTRIES.)
4/17	1.2		1.2	First Solo!! Millers Airfield
4/24	1.0		1.0	1 Take off 1 Landing at Millers
5/1	2.0		2.0	4 take offs 4 landings at Millers
5/19	3.0		3.0	1st Take off from home!! 1 Landing Millers
5/22	2.5		2.5	1 Take off at home 2 take off Landed at Millers
5/27	1.5		1.5	1 Take off home 5 take offs 6 Landings at Millers
5/29	1.0	Kinni	1.0	1 Take off from Millers 1 Landing at Miller (Trailer)
5/30	1.5	Colt	1.5	1 Take off from home 1 Landing at Miller's
6/1	4.0		4.0	1 Take off at home 1 Landing at Millers
6/5	1.2	Cooper	1.2	1 Take off at home 3 Take offs & 4 Landings Miller
6/8	1.0		1.0	1 Take off home 1 Landing Miller (Windy looking for cows)
6/12	1.5	Kaeli	1.5	1 Take off home 1 Landing at Millers

[illegible]

YEAR 20 <u>15</u> DATE	AIRCRAFT MAKE & MODEL	AIRCRAFT IDENT.	POINTS OF DEPARTURE & ARRIVAL		AIRCRAFT CATEGORY				GROUND TRAINER	TYPE OF PILOTING TIME	
			FROM	TO	AIRPLANE SEL	AIRPLANE MEL				DUAL RECEIVED	PILOT-IN- COMMAND
8/22	CE-172	N73464	HAG	LOCAL	6					6	
8/28	CE-172	N73464	HAG	LOCAL	11					11	
9/2	CE-172	N73464	HAG	LOCAL	10					10	
9/22	CE-172	N73464	HAG	LOCAL	10					10	
10/10	CE-172	N73464	HAG	LOCAL	9					9	
10/16	CE-172	N73464	HAG	LOCAL	11					11	
12/4	CE-172	N73464	HAG	LOCAL	12					12	
PAGE TOTAL											
AMOUNT FORWARD											
TOTAL TO DATE											

PILOTING TIME

OT-IN-
MAND

CONDITIONS OF FLIGHT				NO. INSTR. APPR.	NO. LDG. DAY NIGHT	TOTAL DURATION OF FLIGHT	REMARKS, PROCEDURES, MANEUVERS
DAY	NIGHT	CROSS- COUNTRY	ACTUAL INSTR.				
6			EXP 5/17		2	6	Introductory Flight Pitch + Airspeed
11					4	11	BASIC 4 ATTITUDES PER CNTRL
10					10	10	GRAND REF MANEUVERS RECT COURSE TURNS ABOUT APT. SLOW FLIGHT STEEP TURNS T.O. + LDGS
10			EXP 5/17		10	10	T.O. + LDGS PATTERN WORK
10					10	10	T.O. + LDGS PATTERN WORK
9			EXP 5/17		8	9	T.O. + LDGS X-W T.O. + LDGS GO AROUND
11					10	11	PATTERN WORK T.O. + LDGS
12			EXP 5/17		11	12	PATTERN WORK T.O. + LDGS

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

PILOT'S SIGNATURE

YEAR 2016 DATE	AIRCRAFT MAKE & MODEL	AIRCRAFT IDENT.	POINTS OF DEPARTURE & ARRIVAL		AIRCRAFT CATEGORY				GROUND TRAINER	TYPE OF PILOTING TIME	
			FROM	TO	AIRPLANE SEL	AIRPLANE MEL				DUAL RECEIVED	PILOT-IN- COMMAND
4/15	C-172 N73464	N73464	HAG	LOCAL	12					12	
4/30	CE-172	N73464	HAG - FWA - HAG		14					14	
5/6	CE-172	N73464	HAG -	LOCAL	10					10	
5/20	CE-172	N73464	HAG	LOCAL	10					10	
4/4	CE-172	N73464	HAG	LOCAL	9					9	
7/9	CE-172	N73464	HAG	LOCAL	14	1st Solo!				11	3
7/29	CE-172	N73464	HAG	LOCAL	10					5	5
PAGE TOTAL											
AMOUNT FORWARD											
TOTAL TO DATE											

DAY	NIGHT
12	
14	
10	
10	
9	
14	
10	

PILOTING TIME

OT-IN-
MAND

CONDITIONS OF FLIGHT

NO.
INSTR.
APPR.

NO.
LDG.
DAY
NIGHT

TOTAL
DURATION
OF FLIGHT

REMARKS, PROCEDURES, MANEUVERS

DAY

NIGHT

CROSS-
COUNTRY

ACTUAL
INSTR.

SIMULATED
INSTR.

12

10

12

PATTERN WORK

CFI EXP 5/17

14

10

14

ATC Procedures Towered Field

5/17

PATTERN WORK

CFI

10

10

10

PATTERN WORK

EXP 5/17

10

10

10

PATTERN WORK

EXP 5/17

9

9

9

PATTERN WORK

EXP 5/17

14

12

14

PATTERN WORK GO-AROUNDS

CFI EXP 5/17

10

10

10

PATTERN WORK

EXP 5/17

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

PILOT'S SIGNATURE

INITIAL SOLO ENDORSEMENTS

I certify that (First name, MI, Last name) MATTHEW T CHRISTMAN,
has satisfactorily completed the presolo knowledge exam of §61.87(b), received
the required presolo training required by §61.87(c), and has demonstrated the
proficiency of §61.87(d) and is proficient to make solo flights in (make and model
aircraft) CE-172
SIGNED [Signature] DATE 7/9/16
CFI NO. [Redacted] EXPIRATION DATE 5/17

I certify that (First name, MI, Last name) _____,
has received the required training to qualify for local solo flying. I have deter-
mined he/she meets the applicable requirements of §61.87(n) and is proficient
to make solo flights in (make and model aircraft) _____
until (maximum 90 days from date given) _____
Limitations: _____
SIGNED _____ DATE _____
CFI NO. _____ EXPIRATION DATE _____

CROSS-COUNTRY SOLO ENDORSEMENTS

I certify that (First name, MI, Last name) _____,
has received the required solo cross-country training and find he/she has met the
applicable requirements of §61.93, and is proficient to make solo cross-country
flights in a (make and model aircraft) _____
SIGNED _____ DATE _____
CFI NO. _____ EXPIRATION DATE _____

ADDITIONAL AIRPORT WITHIN 25NM SOLO ENDORSEMENTS

I certify that (First name, MI, Last name) _____,
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 (airport name) _____
subject to the following conditions: _____
SIGNED _____ DATE _____
CFI NO. _____ EXPIRATION DATE _____

I certify that (First name, MI, Last name) _____,
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 (airport name) _____
subject to the following conditions: _____
SIGNED _____ DATE _____
CFI NO. _____ EXPIRATION DATE _____

I have reviewed the cross-country planning of (First name, MI, Last name) _____
and find the planning and preparation to be correct
to make the solo flight from (location) _____ to (destination) _____
via (route of flight) _____
with landings at (name the airports) _____
in a (make and model aircraft) _____ on (date) _____
List any applicable conditions or limitations: _____
SIGNED _____ DATE _____
CFI NO. _____ EXPIRATION DATE _____

I certify that MATTHEW T. Christman has
presented me a INDIANA Birth Cert.
establishing that he/she is a U.S. citizen or national in
accordance with 49 CFR 1552.3(h).

Signed

Date 8-22-15

CFI#

Exp. 5/17