Applicant name:	
Phone #:	
FTN #:	
Certificate #:	
Application #:	
Certificate sought:	

Instructor Name:	
Instructor Phone #:	
Aircraft Make/Model:	
N Number:	
Start Time:	
DMS Approved #:	

DUAL TRAINING

14 CFR“ Remarks must note either 61 129 or for commercial training in bold letters 61.129(a)(3)(i)
10 hrs Simulated Instrument Training

Date	Tail #	VLD Hours
	TOTAL:	

14 CFR 61.129(a)(3)(ii)
10 hrs TAA Training IDPIC

Date	Tail #	Hours
	TOTAL	

14 CFR 61.129(a)(3)(iii)
2 hour Day XC

Date	Route	Hours
	TOTAL	

14 CFR 61.129(a)(3)(iv)
2 hour Night XC

Date	Route	Hours
	TOTAL	

14 CFR 61.129(a)(3)(v)
3 hours training in the last 60 days

Date	Tail #	Hours
	TOTAL	

14 CFR 61.129(a)(4)(i)
300 NM XC

Date	Tail #	Hours

Route:
Distance from:

SOLO/DUTIES OF PIC TRAINING

14 CFR 61.129(a)(4)
10 hrs Duties 0f PIC with Instructor

Date	Tail #	Hours

14 CFR 61.129(a)(4)
5 hrs night VFR plus 10x Towered T/O and landings

Date	Tail #	Hours
Solo or PDPIC		
Touch & Go’s at Tower:	**TOTALS**	