

AUSTRALIAN SPORT ROTORCRAFT ASSOCIATION INC

F004 Flight Review



Applicant \_\_\_\_\_ Pilot's Certificate No \_\_\_\_\_ ABN 53 412 417 012

General format should consist of flight preparation, preflight, startup, prerotation, taxi, takeoff, climbout, circuit, approach, landing, takeoff, climb to 500 ft, conduct air exercises, poweroff to safe idle RPM overhead strip, landing poweroff to a full stop, taxi to shutdown, rotor braking, securing aircraft.

(Against each item enter ✓ if satisfactory ✗ if unsatisfactory)

<input type="checkbox"/> Pre-flight Inspection	<input type="checkbox"/> Start-up	<input type="checkbox"/> Pre-rotation
<input type="checkbox"/> Taxiing	<input type="checkbox"/> Takeoff	<input type="checkbox"/> Climb out
<input type="checkbox"/> Circuit Pattern	<input type="checkbox"/> Approach	<input type="checkbox"/> Power Off Landing
<input type="checkbox"/> Landing		

**Exercises (300 to 500 Ft)**

Exercise 1	Conduct a 360 Deg turn left followed by a 360 Deg turn right	
<input type="checkbox"/> Lookout	<input type="checkbox"/> Speed Held	<input type="checkbox"/> Altitude Held
Exercise 2	From cruise, conduct a smooth transition to flight behind the power curve, (gentle sinking, nose not too high) recover with minimal loss of altitude	
<input type="checkbox"/> Transition to behind power curve	<input type="checkbox"/> Flight behind power curve	<input type="checkbox"/> Recovery

**Radio and Airmanship**

<input type="checkbox"/> Use of Radio	<input checked="" type="checkbox"/> General Airmanship
<input type="checkbox"/> Video Supplied ( <i>With prior approval from Training Officer</i> )	
Camera Operators Name _____	

Recommendation if Unsatisfactory	<input checked="" type="checkbox"/> Retest	<input type="checkbox"/> Remedial training	<input type="checkbox"/> Practice
Comments _____			
Instructor's Name _____			
Signature _____	Date _____	Membership No _____	

Notes

1. May be conducted by any current ASRA Instructor, or an Assistant Instructor approved by the Operations Manager.
2. In special circumstances (e.g. remoteness), with prior approval from the Training Officer, an acceptable video of the full flight may be presented.
3. Emphasis should be placed on smooth accurate flying, safety and airmanship.
4. Return completed form, with video if applicable, to the Training Officer at the address found on the front inside cover of the GYRO NEWS and on the ASRA website at [www.asra.org.au](http://www.asra.org.au)

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