**PRACTICAL TEST CHECKLIST-APPOINTMENT**

*Please email completed document to schedules@sandersaviation.com*

##### A. APPLICANT INFO

1. NAME (exactly as shown on current pilot certificate):

(exactly as it is on current photo ID)

*Note: Names on both documents, Medical, and Knowledge Test Results must match exactly.*

2. TYPE OF PHOTO ID: Driver’s License State Issued ID Passport Military Other

Issued By:  ID# Date Issued  Expires

3. CURRENT PILOT CERTIFICATE: Type # Date Issued USAOther

4. Medical Certificate: Class  Date Issued: Date of Birth: USA Other

5. PHONES  EMAIL

6. ADDRESS (as it appears on your current pilot certificate):

(as it appears on your photo ID-if different)

MAIL RECEIVED AT: (if different from the above)

7. CITIZENSHIP  ENGLISH(Y/N)

8. DRUG CONVICTION (Y/N)  If yes, conviction date:

9. Have you ever had a name change (Y/N).

10. Have you ever submitted any application /paperwork to the FAA other than for your current license? (Y/N)

11. Have you ever been a citizen of another country? (Y/N)

If Yes, What Country?  Date you become a US citizen?

**B. CFI INFO:**

NAME  PHONE  EMAIL

AIRPORT  SCHOOL / CLUB  PHONE

**C. TEST INFO:** (Enter information if known)

1. CERTIFICATE / RATING SOUGHT:

2. RETEST?  DATE OF FAILURE ***\****Notice of Disapproval *(Form 8050-5) Must be within 60 days to be valid.*

3. Date of Knowledge Test results:  OR Part 141 Graduation Certificate

4. A/C Model  N  SN (if known)

GPS (model)  Current database (Y/N) ADF  DME

OTHER SPECIAL AVIONICS & NOTES:

5. APPOINTMENT DATE & TIME       APT       LOCATION

6. **8710-1** Date of applicant’s signature ; Date of CFI’s signature

(Note: Applicant must sign prior to CFI)

7. **IACRA** (NOTE: CFI to prepare 8710-1 as backup) Applicant's FTN  ;

Application ID#   Backup 8710-1 completed: