

## NOTICE OF REQUIRED RE-CHECK [STANDARDS NOT MET OR INCOMPLETE SKILL TEST]

## INSTRUCTIONS

A copy of this document must be provided to the CAAV Authorized Person at the time of reexamination

| A. THE SKILL TEST FOR THE FOLLOWING LICENSE:  |                       | DID NOT MEET STANDARDS |   | ARDS                | WAS NOT COMPLETED |        |   |
|---|-----------------------|------------------------|---|---------------------|-------------------|--------|---|
|   |                       |                        | FLIGHT INSTRUCTOR   |                     |                   |        | ON MAINTENANCE TECHNICIAN   |
| 2 COMMERCIAL PILOT  |                       | 7 FLIGI                | HT ENGINEER   |                     | 12                | AVIATI | ON MAINTENANCE SPECIALIST   |
| 3 AIRLINE TRANSPORT PILOT   |                       | 8 FLIGI                | IGHT NAVIGATOR 13   |                     | 13                | AERO   | NAUTICAL STATION OPERATOR   |
| 4 MULTI-CREW PILOT  | MULTI-CREW PILOT 9    |                        | GHT DISPATCHER 14   |                     | 14                | OTHER  | R:  |
| 5 SPORT AVIATION PILOT  | 1                     | 0 GRO                  | UND INSTRUCTO   | OR                  |                   |        |   |
| B. THE RATING(S) INVOLVED: (specify)  |                       |                        |   |                     |                   |        |   |
|   |                       |                        |   |                     |                   |        |   |
|   |                       |                        |   |                     |                   |        |   |
| C. DATE OF THIS SKILL TEST:   |                       |                        | NOTICE  |                     |                   |        |   |
|   |                       |                        | This document expires 60 calendar days after the date of this skill test.  Should that occur, the entire skill test must be repeated. |                     |                   |        |   |
| D. ADDI ICANT INCODMATION   |                       |                        |   |                     | •                 |        | ·   |
| D. APPLICANT INFORMATION:  1. PEL NUMBER (License Number)   |                       |                        | 4. PERMANENT ADDRESS (House Number, Street)   |                     |                   |        |   |
|   |                       |                        | , , ,   |                     |                   |        |   |
| 2. NAME (Family (Last), Middle, Given (First))  |                       |                        | 5. CITY STATE/DISTRICT/PROVINCE ZIP CODE  |                     |                   |        | ZIP CODE COUNTRY  |
|   | ,                     |                        |   |                     |                   |        |   |
| 3. TELEPHONE  |                       |                        | 6. EMAIL  |                     |                   |        |   |
|   |                       |                        |   |                     |                   |        |   |
| E. IF AIRCRAFT WAS USED:  |                       |                        |   |                     |                   |        |   |
| 1. AIRCRAFT MAKE/MODEL 2. PILOT TOTAL HOU   |                       |                        | JRS   | 3. PILOT DUAL HOURS |                   |        | 4. PILOT INSTRUMENT HOURS   |
|   |                       |                        |   |                     |                   |        |   |
| F. THE AREAS FOUND NOT SATISFACTORY: (List using Skill Test Standard paragraph numbers)                                       |                       |                        |   |                     |                   |        | NOTICE  new application, with an instructor's sement, is required if there are any STS paragraph entries in Section F.          |
| G. THE AREAS NOT ACCOMPLISHED: (List using Skill Test Standard paragraph numbers)   |                       |                        |   |                     |                   |        |   |
| H. THE SUBSEQUENT SKILL TEST WILL CONSIST OF (AT A MINIMUM) THE FOLLOWING: (List using Skill Test Standard paragraph numbers) |                       |                        |   |                     |                   | re     | NOTICE  V retains the right to have its authorized presentative re-check any previously eptable Areas of Operation or Subjects. |
| I. ADDITIONAL NOTES:  |                       |                        |   |                     |                   |        |   |
|   |                       |                        |   |                     |                   |        |   |
| J. CAAV AUTHORIZED PERSO  |                       |                        |   |                     |                   |        |   |
|   | 2. TITLE OR DESIGNATI | ON NUMBE               | R   | 3. SIGNA            | TURE              |        |   |