

TEST PROFORMA - OFFSHORE FLYING ROUTE-CHECK

| | |
|--------------------------|--------------------------|
| Company _____ | Date of check _____ |
| Name of Pilot _____ | Block time (D/N) _____ |
| License No. _____ | Location _____ |
| Date of last check _____ | Type of Helicopter _____ |
| Examiner _____ | Registration _____ |

| | Pilot proficiency |
|---|-------------------|
| A. Ground Checks | |
| 1. Status on recurrent training | |
| 2. Performance and limitations | |
| 3. Mass & Balance | |
| 4. Emergency procedures | |
| | |
| B. Preflight | |
| 1. Flight planning | |
| 2. Pre-flight inspection | |
| 3. Passenger briefing | |
| 3. Use of checklist | |
| 4. Engine starting procedures | |
| 5. Cockpit check after starting | |
| 6. Departure briefing | |
| 7. Navigation systems set-up | |
| 8. Taxi | |
| | |
| C. En-route | |
| 1. Navigation – use of navigation systems | |
| 2. Altitude selection | |
| 3. Fuel management | |
| 4. Position reporting | |
| | |
| D. Approach & Landing | |
| 1. Pre landing checks | |
| 2. Approach selection – FP and NFP | |
| 3. Deck clearance | |
| 4. Final Approach | |
| 5. Landing | |
| | |

