



English Language Proficiency Check Level 4

Examination in an exam centre (please send form to head of centre)

Licence Nr.

Applicant : Last name: _____ First name: _____ Date of birth: _____

Native language: English German French Italian other: _____ Nationality: _____

Address: Street/ P.O. Box: _____

Postal code: _____ City: _____ Country: _____

Phone: _____ e-mail: _____

Invoice and licence to be sent to applicant company: _____

RTF examination passed (theory and practical classroom test)
Signature of applicant:

Current licence:

- | | |
|--|--|
| <input type="checkbox"/> Aeroplanes <input type="checkbox"/> LAPL <input type="checkbox"/> PPL <input type="checkbox"/> CPL <input type="checkbox"/> MPL <input type="checkbox"/> ATPL <input type="checkbox"/> Helicopters <input type="checkbox"/> LAPL <input type="checkbox"/> PPL <input type="checkbox"/> CPL <input type="checkbox"/> ATPL <input type="checkbox"/> incl. IFR | <input type="checkbox"/> SPL <input type="checkbox"/> BPL <input type="checkbox"/> Student Pilot <input type="checkbox"/> other: _____ |
|--|--|

Enrolment for:

- Initial examination for Level 4 Renewal of Language Proficiency endorsement Level 4
 Revalidation of Language Proficiency endorsement Level 4 Repetition of failed Language Proficiency check Level 4

Desired examination Date: _____ Alternative Date: _____

Result of the Language Proficiency Check and RTF observation:

| Language Proficiency Check | Passed | Failed | Acknowledgement of result Applicant's signature: |
|--|--|---|---|
| Part 1: Listening comprehension: | <input type="checkbox"/> ≥ Level 4 | <input type="checkbox"/> < Level 4 | |
| Part 2: Speaking ability: | Pronunciation <input type="checkbox"/> ≥ Level 4 | <input type="checkbox"/> < Level 4 | |
| | Fluency <input type="checkbox"/> ≥ Level 4 | <input type="checkbox"/> < Level 4 | |
| | Vocabulary <input type="checkbox"/> ≥ Level 4 | <input type="checkbox"/> < Level 4 | |
| | Structure <input type="checkbox"/> ≥ Level 4 | <input type="checkbox"/> < Level 4 | |
| | Comprehension <input type="checkbox"/> ≥ Level 4 | <input type="checkbox"/> < Level 4 | |
| Interaction <input type="checkbox"/> ≥ Level 4 | <input type="checkbox"/> < Level 4 | | |
| RTF Observation | Passed | Failed | |
| | <input type="checkbox"/> RTF sufficient | <input type="checkbox"/> RTF insufficient | |
| | <input type="checkbox"/> RTF marginal* | | |
| Overall Result of the Language Proficiency Check and RTF observation: | | | |
| <input type="checkbox"/> passed <input type="checkbox"/> failed | | | |

1 st Language Assessor last name: _____ First name: _____

Licence no: _____ Signature: _____

2 nd Language Assessor last name: _____ First name: _____

Licence no: _____ Signature: _____

Location & date: _____



Important notes

Language proficiency check

A copy of the failed Language Proficiency Check form must be attached to the enrolment for repetition.

RTF observation

- If RTF is **marginal**, the test taker is **recommended** to participate in an RTF Refresher course.
- If RTF is **insufficient**, the Language Proficiency check is failed. The test taker makes errors which may affect safety (for instance using ambiguous plain language instead of using standard phraseology, or using safety-critical incorrect phraseology such as “ready for take-off”).

Hinweis:

Innert 10 Tagen nach Zustellung des Ergebnisses vom Skill Test/Proficiency Check kann beim Bundesamt für Zivilluftfahrt, 3003 Bern, schriftlich die Ausstellung einer beschwerdefähigen Verfügung über das Prüfungsergebnis verlangt werden.

Remarque:

Il est possible, dans les dix jours suivant la communication du résultat du Skill Test/Proficiency Check d'obtenir, sur réquête écrite auprès de l'Office fédéral de l'aviation civile, 3003 Berne, une décision susceptible de recours portant sur le résultat dudit examen.

Avviso:

Entro dieci giorni dall'invio dei risultati dello Skill Test/Proficiency Check può essere richiesta per iscritto all'Ufficio federale dell'aviazione civile, 3003 Berna, una decisione impugnabile sull'esito dell'esame.

Remark:

Within 10 days after receipt of this skill test/proficiency check result, an appealable decision about the test / check results may be requested in writing to the Federal Office of Civil Aviation, 3003 Bern, using one of the official languages (German/French/Italian)