AFF INSTRUCTOR RATING COURSE PROFICIENCY CARD

CANDIDATE: Refer to the rating requirements listed in the Introduction and Orientation section of the USPA AFF Instructor Rating Course outline in the USPA Instructional Rating Manual. Some requirements are listed there alone, and some are listed only on this Proficiency Card.

Sign-off dates may not be more than 12 months old as of the course start date. Many requirements may be performed in conjunction with a USPA AFF Instructor Rating Course. VERIFYING OFFICIALS: Use this form to record that the candidate has met all necessary requirements for the USPA AFF Instructor rating. The level of official verification is indicated with each requirement. Each of the undersigned certifies that he or she has personally verified those qualifications listed.

*Current USPA Instructors need not meet starred requirements.

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USPA AFF RATING APPLICATION							☐ Update My Address		
First Name	Last Name	US	SPA #:	Expiration	n Date:_	/_ M	/_ D	/	
Mailing Address									
Add'l. Address									
	State 2								
Weekday Phone ()	Emai	l			DOB:_	/_	/_	/	
	(Must be USPA C or highe						_	-	
These settings may affec	at I am responsible for maintaining at t the display of my information in Pa	arachutist <i>c</i>	or on uspa.c	org. (See uspa.org/Pri	vacy fo	more ir		on.)	
Applicant's Signature (for future au	rthentication purposes):								
I CERTIFY THAT							_ HAS:		
PRIOR TO ARRIVAL AT THE USPA I		of candidate		o Category C and two Ca	togon, D	ΛΕΕ group	ad prope		
		4. 7	reer iii two	o category c and two ca	tegory D	Air groui	iu preps.		
•	of the questions on the USPA AFF	-							
Instructor Final Examination.		C	ategory C	AFF Instructor signatu	re	Memb	ership #	Date	
		_	0	AFEL			1: "		
Course examiner signature	Membership # Date		ategory C	AFF Instructor signatu	re	iviemb	ership #	Date	
FIRST JUMP COURSE TRAINING		_							
2. Assisted in two AFF first-jump cour	ses.	C	ategory D	AFF Instructor signatu	re	Memb	ership#	Date	
		_							
AFF Instructor signature	Membership # Date		ategory D	AFF Instructor signatu			ership#	Date	
			, ,	ht freefall stability and bas Il turns, backloops, barrel i			•		
AFF Instructor signature	Mambarahin # Data								
BEFORE OR DURING THE COURSE	Membership # Date	-	ISPA Instructor	signature	Members	ship#		Date	
		6. *	Prepared an	effective canopy flight p	olan and p	orovided (ground-to	o-air (for	
3. *Observed all AFF ground preps i	n Categories A through E.	е	xample, radio	o) instruction for winds (up to 14 n	nph.			
AFF Instructor signature	Membership # Date	U	ISPA Instructor	signature	Members	ship #		Date	
\$60 RATIN	IG FEE: Paid by candidate with			rned with After-Actio	n Repor	t			
	Information below this line v	vill be destroy	yed after proc	essing ••••••	• • • • • •	• • • • • •	• • • • • •	• • • • • • •	
CARD NUMBER (American Express	s, Discover , MasterCard, and Visa)			SECURITY CODE	E)	KP. DATE (MMYY)		

Pa	ge 2 CANDIDATE NAME		Member #	
7.	*Participated in the spotting and aircraft lessons from Categor through E (or equivalent training).	ries C	12. Completed three satisfactory air evaluations, Category Category C reserve side, and Category D (modified).	C main side,
	(initials:) Category C Category D Category E		• Category C (m) AFF evaluator signature Membership #	Date
	USPA Instructor signature Membership #	Date	• Category C (r) AFF evaluator signature Membership #	Date
8.	*Demonstrated competence to gear up and check a student.		• Category D AFF evaluator signature Membership #	Date
9.	AFF evaluator signature Membership # *Demonstrated the ability to conduct a satisfactory debriefing	Date .	13. Participated in all portions of the USPA AFF Instructor F	Rating Course.
10.	AFF evaluator signature Membership # On practice release jumps using an AFF Instructor as a studer	Date nt:	RATING RECOMMENDATION I have personally examined and recommend this applicant for t	ha IISDA AEE
	• stabilized inverted student AFF evaluator signature Membership #	# Date	Instructor rating. He or she has demonstrated the ability to train AFF students and to train and supervise non-method-specific s	n and jump with
	• stopped a spin AFF evaluator signature Membership #	Date	USPA A license.	
11.	deployed for a student	Date preparation	Course examiner name (please print) Member # Course examiner signature	
	• Category C AFF evaluator signature Membership #	Date	Course Date	
	• Category D AFF evaluator signature Membership #	Date	Dropzone	

THIS FORM MUST BE SUBMITTED TO USPA BY THE COURSE EXAMINER (SEE IRM 1-3).