

# IAD AND STATIC-LINE INSTRUCTOR RATING COURSE PROFICIENCY CARD

**CANDIDATE:** Refer to the rating requirements listed in the Introduction and Orientation section of the USPA IAD and Static-Line 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 IAD or Static-Line Instructor Rating Course.

**VERIFYING OFFICIALS:** Use this form to record that the candidate has met all necessary requirements for the USPA IAD or Static-Line 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.

## USPA IAD AND STATIC-LINE INSTRUCTOR RATING APPLICATION

Update My Address

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ USPA #: \_\_\_\_\_ Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_/  
M D Y

Mailing Address \_\_\_\_\_

Add'l. Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip or Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Weekday Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Email \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_/  
M D Y

Sex:  M  F License Number: \_\_\_\_\_ (Must be USPA C or higher) Total Freefall Time: \_\_\_\_\_ Total Sport Jumps: \_\_\_\_\_

*I understand that I am responsible for maintaining my privacy settings in my USPA account at [uspa.org/me](http://uspa.org/me).  
These settings may affect the display of my information in Parachutist or on [uspa.org](http://uspa.org). (See [uspa.org/Privacy](http://uspa.org/Privacy) for more information.)*

Applicant's Signature (for future authentication purposes): \_\_\_\_\_

**I CERTIFY THAT** \_\_\_\_\_ **HAS:**  
name of candidate

### PRIOR TO ARRIVAL AT THE USPA INSTRUCTOR RATING COURSE:

1. Correctly answered at least 80% of the questions on the USPA (check one)  IAD or  Static-Line Instructor Final Examination.

\_\_\_\_\_  
Course examiner signature Membership # Date

\_\_\_\_\_  
 IAD or  Static-Line Instructor signature Membership # Date

### FIRST JUMP COURSE TRAINING

2. Assisted in two IAD or static-line first-jump courses.

\_\_\_\_\_  
 IAD or  Static-Line Instructor signature Membership # Date

4. Conducted four simulated or actual IAD or static-line jumps with experienced jumpers (B license and 100 jumps) acting as students.

\_\_\_\_\_  
 IAD or  Static-Line Instructor signature Membership # Date

\_\_\_\_\_  
 IAD or  Static-Line Instructor signature Membership # Date

\_\_\_\_\_  
 IAD or  Static-Line Instructor signature Membership # Date

### BEFORE OR DURING THE COURSE

3. Assisted in training a skydiver on at least three practice deployment IAD or static-line jumps, including debriefing.

\_\_\_\_\_  
 IAD or  Static-Line Instructor signature Membership # Date

\_\_\_\_\_  
 IAD or  Static-Line Instructor signature Membership # Date

\_\_\_\_\_  
 IAD or  Static-Line Instructor signature Membership # Date

\_\_\_\_\_  
 IAD or  Static-Line Instructor signature Membership # Date

**\$60 RATING FEE:**  Paid by candidate with application  Returned with After-Action Report

..... Information below this line will be destroyed after processing .....

\_\_\_\_\_  
CARD NUMBER (American Express, Discover, MasterCard, and Visa)

\_\_\_\_\_  
SECURITY CODE

\_\_\_\_\_  
EXP. DATE (MMYY)

5. \*Observed ground preps in Categories B, C, E, and F.

\_\_\_\_\_  
USPA Instructor signature                      Membership #                      Date

6. \*Assisted in training at least two first-solo freefall students, including debriefing.

**5 SEC DELAY**

\_\_\_\_\_  
USPA Instructor signature                      Membership #                      Date

**10 SEC DELAY**

\_\_\_\_\_  
USPA Instructor signature                      Membership #                      Date

7. \*Correctly taught freefall stability and basic freefall maneuvers, including freefall turns, backloops, barrel rolls, front loops, and tracking.

\_\_\_\_\_  
USPA Instructor signature                      Membership #                      Date

8. \*Prepared an effective canopy flight plan and provided ground-to-air (for example, radio) instruction for winds up to 14 mph.

\_\_\_\_\_  
USPA Instructor signature                      Membership #                      Date

9. \*Participated in the spotting and aircraft lessons from Categories C through E (or equivalent training). **Initials:**

Category C \_\_\_\_\_ Category D \_\_\_\_\_ Category E \_\_\_\_\_

\_\_\_\_\_  
USPA Instructor signature                      Membership #                      Date

**AT THE USPA INSTRUCTOR RATING COURSE:**

10. From student position, make at least one IAD or Static-Line Jump, according to the rating the candidate seeks.

\_\_\_\_\_  
Evaluator signature                      Membership #                      Date

11. Demonstrated satisfactory knowledge of static-line rigging procedures for both direct-bag and static-line assist (static-line only).

\_\_\_\_\_  
Course examiner signature                      Membership #                      Date

12. \*Demonstrated competence to gear up and check a student.

\_\_\_\_\_  
Evaluator signature                      Membership #                      Date

13. \*Demonstrated competence to spot for a student.

\_\_\_\_\_  
Evaluator signature                      Membership #                      Date

14. Received personal instruction from an USPA IAD or Static-Line Instructor (per rating sought) on the following emergency areas:

\_\_\_\_\_  
• IAD AC Procedures      Course examiner signature      Membership #      Date

\_\_\_\_\_  
• SL AC Procedures      Course examiner signature      Membership #      Date

15. Completed one satisfactory IAD or static-line Category B training evaluation.

\_\_\_\_\_  
Course examiner signature                      Membership #                      Date

16. Completed one satisfactory Category D freefall and canopy training session and air evaluation.

\_\_\_\_\_  
Course examiner signature                      Membership #                      Date

17. Conducted at least two actual IAD or static-line jumps.

\_\_\_\_\_  
Course examiner signature                      Membership #                      Date

\_\_\_\_\_  
Course examiner signature                      Membership #                      Date

18. Participated in all portions of the USPA (check one)  
 IAD or  Static-Line Instructor Rating Course.

\_\_\_\_\_  
Course examiner signature                      Membership #                      Date

**RATING RECOMMENDATION**

I have personally examined and recommend this applicant for the USPA IAD or Static-Line Instructor rating. He or she has demonstrated the ability to train and supervise  IAD  static-line (check one) students and to train and supervise non-method-specific students for the USPA A license.

\_\_\_\_\_  
Course examiner name (please print) and member #

\_\_\_\_\_  
Course examiner signature                      Date

\_\_\_\_\_  
Dropzone                      Training Method (IAD or Static-Line)