

Beginning Date: _____

Ending Date: _____

Beginner Pilot: _____

Flight Instructor: _____

I, _____ feel confident to control a radio controlled model aircraft in a safe manner, being able to take off, fly in controlled flight and land in a safe manner during a solo flight.

I, _____ being a CORKS flight instructor, have witnessed the above pilot in solo flight perform a safe flight from take off through flight maneuvers to a safe landing.

Congratulations