POOLEY'S STUDENT PROGRESS RECORD

Name of Student: ____________________

Approved Training Organisation: ____________________

Sheet No: __________

Course Type:

- EASA PPL ☐
- EASA LAPL ☐
- IMC Rating/IR (R) ☐
- Night Rating ☐
- EASA CPL ☐
- SEP/MEP* (delete as appropriate) ☐
- Instructor Certificate ☐
- Other (please specify) ☐

POOLEY'S
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Date	Aircraft/ Simulator	Instructor	Flight Exercises	Emergency Exercises	Handling		Cross Country		Instrument Flying	Other Flying	Progress Test (PT)	Pass (P) or Fail (F)	Remarks	Instructor & Student Signature
dd/mm/yy					Dual	Solo	Dual	Solo					(Use more than one line as necessary)	
				Totals Brought Forward										

Totals Carried Forward		Handling Dual	Handling Solo	Cross Country Dual	Cross Country Solo	Instrument Flying	Other Flying
	Hrs						
	Mins						

Grand Total: ____________________

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