

WYWG MOUNTAIN FLIGHT TRAINING			DATE OF FLIGHT TRAINING:		
MEMBER'S NAME (PRINT OR TYPED)		FAA CERTIFICATE NO.		CHARTER NO.	
CAPID	LAST CAPF 5 DATE	GROUND SCHOOL		GROUND SCHOOL CERTIFICATE DATE	
I. ORAL DISCUSSION			IV. RIDGE FLYING		
A. Mountain Weather			A. Recognition and Use of Orographic Lift		
B. Effect of Density Altitude			B. Recognition of Areas of Lift and Sink		
C. Orographic Effects on Winds			C. Proper Ridge Crossing Techniques		
D. Route Planning			D. Planning for Emergencies		
E. Oxygen Regulations and Use			V. NAVIGATION		
F. One-Way, High Altitude, Obstructed Airport			A. Use and Limitations of Nav aids		
G. Survival Equipment and Techniques			B. Use of Sectional Charts		
II. PREFLIGHT PLANNING			C. Use of Compass/DG		
A. Planning the Route			D. Magnetic Variation and its Limits		
B. Density Altitude Computations			E. Use of Major Terrain Features		
C. Aircraft Loading			VI. EMERGENCY PROCEDURES		
D. Weather Briefing and Analysis			A. Deteriorating Weather		
E. Oxygen Equipment Checkout			B. Engine Failure		
F. Preflight Inspection (aircraft and pilot)			C. Partial Power Loss		
III. AIRPORT OPERATIONS			D. Inability to Maintain Altitude (downdraft)		
A. High Altitude Takeoff and Landing			E. Inability to Attain Altitude (density altitude)		
B. One-Way Takeoff and Landing (terrain)			F. Whiteout		
C. One-Way Takeoff and Landing (gradient)					
I certify that I have provided flight training as indicated and that the above-named member (instructor initials blanks):					
_____ Has demonstrated proficiency required to fly as PIC over mountainous terrain.					
_____ Requires additional training. See comments below.					
COMMENTS:					
DATE	FLIGHT TIME	INSTRUCTOR'S NAME & GRADE		INSTRUCTOR'S SIGNATURE	