

**Instructions for Use:**

1. Check **C** column if you determine the document or individual item conforms to requirements.
2. Check **N/C** column if you determine that the document or individual line item does not comply (put a marker tab in the manual with a short note opposite the non-complying item).
3. Check **N/Ckd** if the item was not checked. Reasons should be given in remarks column.
4. Check **N/A** column if it is not applicable or you do not have adequate information to make a valid comment.
5. Coordination is required between FOPS and PEL as necessary. The respective inspector shall sign on the last column after reviewing the item.
6. Use the remarks column at the end for overall remarks or observations. For detailed findings inspectors should also use the FSS-GEN-FORM 39: Audit Inspection Report Form. Attach to this checklist.

<b>TRAINING INSPECTION – FACILITY OR IN-PROGRESS</b>			
<b>FSS-OPS-FORM 029</b>			
<b>Operator File Reference</b>	<b>Inspector Name/s</b>	<b>Date/s of Inspection Date Evaluation</b>	
<b>Name of Operator/Applicant</b>	<b>Training Programme Title</b>	<b>Location of Facility</b>	<b>Contact Person/Phone</b>

<b>ADMINISTRATION AND PRODUCTION FACILITIES</b>		
1.	Adequate supervisory and administrative support staff available	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
2.	Training schedules coordinated with operational needs	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
3.	Training documents and handouts adequate	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
4.	Computers with presentation capability available to training and checking personnel	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
Remarks:		

TRAINING MANUAL/PROGRAMME/CURRICULA		
5.	Training Manual / programme properly updated (compare to Authority approved copy)	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
6.	Pertinent portions of manual provided to instructor, checking, and administration staff	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
7.	If training is contracted to third part, ATO programme approval by NCAA available and current	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
8.	Training curriculum/syllabus reflects the type of operation, flight regime and relevant aircraft type and on-board equipment	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
9.	Curriculum(s)/training profiles in use available and current	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
10.	Lesson plan(s) in use available and current	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
11.	<i>Remarks:</i>	

TRAINING AIDS AND EQUIPMENT		
12.	CBT platforms and other self-teach equipment have clear operating instructions available for the trainee's use.	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
13.	Condition - All equipment used in the training programme operate and function in good working order including the following as applicable:	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
14.	a. Whiteboards, markers and erasers	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
15.	b. Flight deck or system pictorial layout representative of system/s	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
16.	c. Computer/s	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
17.	d. Computer projector	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
18.	e. Audio/visual system	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
19.	f. Special equipment – system mockup accurate and operational?	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
<i>Remarks:</i>		

ALL INSTRUCTOR(S)		
20.	Instructor(s) have proper qualifications	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
21.	Instructor(s) records up-to-date	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
22.	Instruction techniques and delivery. Presentation of material is clear logical and well organised	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
23.	Adherence to lesson plan outline	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
24.	Adherence to lesson plan content	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>

25.	Adherence to lesson plan total and segment timing	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
26.	Trainee participation and response to instructor's presentation	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>

Remarks:

### FLIGHT INSTRUCTOR(S)

27.	In addition to the areas listed in e) above, flight instructors shall be evaluated in the areas listed below:	-
28.	Proficient in the operation of the aircraft, flight simulator and other training devices as applicable	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
29.	Proficient in the performance of manoeuvres and procedures which they are teaching.	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
30.	Briefing - provide a thorough pre-flight briefing (for FSTD or the aircraft) on all manoeuvres and procedures that will be conducted.	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
31.	Debriefing - provide a thorough post-flight debriefing to review each individual student's performance during a training session.	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
32.	Evaluation - properly evaluate trainee progress and provide or recommend additional training when necessary.	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
33.	Exercising flexible to ensure high level of realistic training is achieved.	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>

Remarks:

### CHECKING PERSONNEL AND COMPLETION STANDARDS

34.	Adequate staffing/availability for range of checking?	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
35.	Checking personnel records are available?	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
36.	Checking personnel records up-to-date	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
37.	Appropriate "O" checklist for evaluation of checking person performance completed?	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
38.	Appropriate "O" checklist for evaluation of checking person records completed?	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
39.	Acceptable completion standards available	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
40.	Questionnaires and tests relevant and well administered	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
41.	Student receive a debriefing regarding performance	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
42.	Instructor or checking person made completion entries in student's record(s)	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
43.	Entries were accurate with respect to the debriefing and the student's performance	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>

Remarks:

<b>CLASSROOMS, TRAINING AREAS AND BRIEFING ROOMS</b>		
44.	Number and size adequate for the purpose used	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
45.	Adequate seating space and writing accommodation	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
46.	Student visibility accommodation unhindered	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
47.	Student hearing accommodation (no noise distraction)	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
48.	Reasonable heating/cooling/ventilation/lighting	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
49.	Number and size adequate for the task	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
50.	Adequately furnished and equipped	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
Remarks:		
<b>DOCUMENTS AND HANDOUTS</b> <b>[As specified in the Training Manual, curriculum, or lesson plan evaluated]</b>		
51.	Appropriate route and navigation charts available	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
52.	Appropriate portions of Operations manual available	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
53.	Training source materials and examples	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
54.	Training problems and calculations	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
55.	Tests and other evaluation tools	N/A <input type="checkbox"/> C <input type="checkbox"/> N/C <input type="checkbox"/> Not Ckd <input type="checkbox"/>
Remarks:		

**INSPECTOR COMMENTS:**

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**TRAINING PROGRAMME APPROVAL**

**APPROVED**

**NOT APPROVED**

**INSPECTOR NAME :** .....

**SIGNATURE, DATE AND ASI STAMP:** .....

## **Conduct Facilities and Records Inspections – Inspector Guidance**

Give a management representative short notice of the inspection.

Conduct an entry meeting with the management of the training facility:

- Review the scope of the inspection.
- Agree on the allocation of company staff or resources that may be needed for the inspection.
- Request a discreet and private working area to facilitate the confidential assessment of documents and preparation of reports.

Carry out the inspection, in a way that causes minimum of disruption to the operator, using appropriate checklists.

Follow appropriate checklists and procedures when carrying out specific separate inspections – for example, flight simulators.

Conduct a short exit meeting with the management representative.

Briefly report the findings of the inspection.

Make arrangements for any follow-up action.

### **Observations of Training-In-Progress**

Give the AOC holder notice of your intention to conduct an inspection.

Conduct an entry meeting with the management of the training facility:

- Review the scope of the inspection.
- Agree on the allocation of any company staff or resources that may be needed for the inspection.

Carry out the inspection, in a way that causes a minimum of disruption to the operator, using the appropriate checklist.

Remain positive in classrooms and training areas. Do not:

- Ask questions of the instructors or students.
- Distract instructors or students in any way.
- Displace existing students from their allocated seat or positions.

Conduct a short exit meeting with the training management:

- a. Briefly explain the findings of the inspection.
- b. Make arrangements for any follow-up action.