



AFF INSTRUCTOR RATING COURSE PROFICIENCY CARD

24-07

CANDIDATE: Refer to the rating requirements listed in the Introduction and Orientation section of the USPA AFF 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 AFF Instructor Rating Course.

VERIFYING OFFICIALS: Use this form to record that the candidate has met all necessary requirements for the USPA AFF 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.

**Current instructors do not need to meet this FJC requirement if they have taught a complete FJC in any method within the preceding 12 months and the Examiner waives this requirement by covering the method-specific FJC topics in detail during the course.

USPA AFF 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. These settings may affect the display of my information in Parachutist or on uspa.org. (See 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 AFF Instructor Final Examination.

Course examiner signature Membership # Date

FIRST JUMP COURSE TRAINING

**(Waived) Course examiner signature Membership # Date

2. Assisted in two complete AFF first-jump courses.

AFF Instructor signature Membership # Date

AFF Instructor signature Membership # Date

BEFORE OR DURING THE COURSE

3. *Observed all AFF ground preps in Categories A through E.

AFF Instructor signature Membership # Date

4. *Assisted in two Category C and two Category D AFF ground preps.

Category C AFF Instructor signature Membership # Date

Category C AFF Instructor signature Membership # Date

Category D AFF Instructor signature Membership # Date

Category D AFF Instructor signature Membership # Date

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

USPA Instructor signature Membership # Date

6. *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

\$ 72 RATING FEE: ☐ Paid by candidate with application ☐ Returned with After-Action Report

☐ I authorize my card on file at uspa.org/me to be used for this purchase.

Page 2 CANDIDATE NAME _____ Member # _____

7. *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:

8. *Demonstrated competence to gear up and check a student.

AFF evaluator signature Membership # Date

9. *Demonstrated the ability to conduct a satisfactory debriefing.

AFF evaluator signature Membership # Date

10. On practice release jumps using an AFF evaluator as a student:

• **stabilized inverted student** AFF evaluator signature Membership # Date

• **stopped a spin** AFF evaluator signature Membership # Date

• **deployed for a student** AFF evaluator signature Membership # Date

11. Completed one satisfactory Category C and one Category D ground preparation evaluation.

• **Category C** AFF evaluator signature Membership # Date

• **Category D** AFF evaluator signature Membership # Date

12. Completed three satisfactory air evaluations, Category C main side, Category C reserve side, and Category D (modified).

• **Category C (m)** AFF evaluator signature Membership # Date

• **Category C (r)** AFF evaluator signature Membership # Date

• **Category D** AFF evaluator signature Membership # Date

13. Participated in all portions of the USPA AFF Instructor Rating Course.

Course examiner signature Date

RATING RECOMMENDATION

I have personally examined and recommend this applicant for the USPA AFF Instructor rating. He or she has demonstrated the ability to train and jump with AFF students and to train and supervise non-method-specific students for the USPA A license.

Course examiner name (please print) Member #

Course examiner signature

Course Date _____

Dropzone

THIS FORM MUST BE SUBMITTED TO USPA BY AN EXAMINER (SEE IRM 1-3).