

Flight Lab Grading Sheet

Student Name: _____
Semester: _____
Flight Lab: PILT 1300 Instrument Lab
CFI/Flight Lab Instructor _____

Instructor:

Fill out the following information for your Salt Lake Community College flight student.

a. What Recip [R-44/22] Trans Lab syllabus lesson (i.e. # ___ of 8) has the student most recently completed: _____

Date of first flight in this lab: _____

Date of last flight in this lab: _____

b. If student has not started flying or is not yet complete indicate reason(s) why:

Please grade the student on each of the following areas

Grading Scale: 0-4 (0=unsatisfactory.....2=average.....4=outstanding)

a. Flight Skills [50%]:

b. Time to Complete [50%]:

- Completed within term : Y / N

- Total flt hrs flown in this lab: _____

- Avg flt hrs/week/term: _____

-Total Gnd hrs completed: _____

Instructor comments: _____

CFI Signature,

Date