

Personal Aeronautical Goals

Pilot's Name: _____ CFI: _____
Date: _____ Review Date: _____

Training Goals

_____ Certificate Level (Private, Commercial, ATP)
_____ Ratings (Instrument, AMEL, ASES, AMES, etc)
_____ Endorsements (high performance, complex, tailwheel, high altitude)
_____ Phase in Pilot Proficiency (Wings) Program
_____ Instructor Qualifications (CFI, CFI-I, MEI, AGI, IGI)
Other: _____

Proficiency Goals

_____ Lower personal minimums to:
_____ Ceiling
_____ Visibility
_____ Winds
_____ Precision Approach Minimums
_____ Non-Precision Approach Minimums
_____ Fly at least:
_____ Times per month
_____ Hours per month
_____ Hours per year
_____ XC flights per year
_____ Night hours per month
_____ Make a XC trip to:
Other: _____

Aeronautical Training Plan
