



A License Proficiency Card & Application

United States Parachute Association®

EXIT & FREEFALL SKILLS

- Demonstrate freefall control on all axes, with a backloop, front loop, and barrel roll.
Date _____ I _____ Lic. # _____
- Dive a minimum of 100 feet after another jumper and dock safely without assistance from the other jumper (two times).
 1 2 C/I _____ Lic. # _____
- Plan and independently execute a break-off from a group skydive with a **minimum 100 feet of horizontal separation** from another jumper or group. Separation must be gained independently in a straight track **within ten degrees of a radial heading** from the center of the formation.
Jump # _____ C/I _____ Lic. # _____
- Locate and open clear of other jumpers and wave off to signal deployment.
Jump # _____ C/I _____ Lic. # _____
- Jump and deploy while stable within five seconds after exit from 3,500 feet AGL.
Jump # _____ C/I _____ Lic. # _____

CANOPY SKILLS

- Plan and fly a landing approach pattern that promotes smooth traffic flow and avoids obstacles.
Jump # _____ C/I _____ Lic. # _____
- Demonstrate a stand-up landing.
Jump # _____ C/I _____ Lic. # _____
- Perform a braked approach and landing.
Jump # _____ C/I _____ Lic. # _____
- Land within 65 feet of a preselected target on at least five jumps.
 1 2 3 4 5 C/I _____ Lic. # _____
- Perform rear-riser turns (brakes set and released).
Jump # _____ C/I _____ Lic. # _____
- Above 2,500 feet, perform a maximum-performance 90-degree toggle turn, followed immediately by a turn of at least 180 degrees in the opposite direction (two times).
 1 2 C/I _____ Lic. # _____
- Above 2,000 feet, perform front riser dives and turns (may be waived if insufficient strength).
Jump # _____ C/I _____ Lic. # _____
- Accurately predict the presence and effects of turbulence in the landing area.
Jump # _____ C/I _____ Lic. # _____

EQUIPMENT KNOWLEDGE

- Demonstrate knowledge, inspection, donning, use, and owner maintenance of all equipment to be used on the jump.
Date _____ C/I _____ Lic. # _____
- Calculate the wing loading of both main and reserve canopies and compare the sizes against the manufacturer's published recommendations.
Date _____ C/I _____ Lic. # _____
- Demonstrate the understanding, use, and disconnection of a reserve static line.
Date _____ C/I _____ Lic. # _____
- Demonstrate the understanding and use of an automatic activation device.
Date _____ C/I _____ Lic. # _____
- Pack a main parachute without assistance.
Date _____ C/I _____ Lic. # _____
- Check equipment for another skydiver.
Date _____ C/I _____ Lic. # _____
- Perform manufacturer-recommended owner service on a canopy release system.
Date _____ C/I _____ Lic. # _____
- Change or adjust a main closing loop.
Date _____ C/I _____ Lic. # _____
- Show knowledge of FAA rules on parachute packing intervals and required personnel.
Date _____ C/I _____ Lic. # _____

EMERGENCY REVIEW

(Each qualifying review session **must** be conducted **after initial solo jump training** on later dates.)

1. In a training harness, recognize and take appropriate action for all parachute malfunctions (**two review sessions following the first-jump course**).

- 1 2 C/I _____ Lic. # _____
- Review power line avoidance and landings.
Jump # _____ C/I _____ Lic. # _____
- Review tree avoidance and landings.
Date _____ C/I _____ Lic. # _____
- Review building avoidance and landings.
Date _____ C/I _____ Lic. # _____
- Review water avoidance and landings.
Date _____ C/I _____ Lic. # _____
- Review aircraft emergency procedures.
Date _____ C/I _____ Lic. # _____

AIRCRAFT & SPOTTING

- Demonstrate understanding of seat belt use and applicable FARs.
Date _____ C/I _____ Lic. # _____
- Identify local runway headings, lengths, and aircraft approach and departure patterns.
Date _____ C/I _____ Lic. # _____
- Using an aviation winds aloft forecast, select the correct exit and opening point.
Date _____ I _____ Lic. # _____
- Recite cloud clearance and visibility requirements for above and below 10,000 feet MSL.
Date _____ I _____ Lic. # _____
- Receive a briefing on weight and balance, the effect of a jumper on aircraft control surfaces when outside an aircraft, spotting, and radio and onboard communication procedures.
Date _____ I _____ Lic. # _____
- In routine jump conditions, plan with a jump pilot and spot the aircraft without assistance.
Date _____ I _____ Lic. # _____

APPLICANT

(Please type or print.) Change address on file

First Name _____ Last Name _____

Street Address _____

City, State & Zip _____

Telephone _____ DOB ____ / ____ / ____

Email _____

By submitting this application for processing, I acknowledge that my privacy settings for sharing my personal information with third parties, in Parachutist and in public lists at uspa.org are to be maintained by myself in my USPA account at uspa.org.

USPA # _____ **X** _____
Signature of Applicant

VERIFICATION

License Requirement	Lic.#	Ins. Sig
Check dive with USPA Instructor	_____	_____
(See SIM 3-2.A.1.c)	_____	_____
25 skydives	_____	_____
A-license oral exam	_____	_____
A-license written exam	_____	_____
Standup landing	_____	_____
Met SIM 3-2.A.1.c.(10)	_____	_____
Joined USPA	_____	_____

All blocks on this record must be initialed or signed as indicated.

Instructor's Name _____

Signature _____

USPA # _____ Date ____ / ____ / ____

Drop Zone _____

Official USPA A-license stamp:
This stamp and signature of a USPA Instructor or Examiner verifies that the applicant has completed all qualifications for the USPA A skydiving license and performed satisfactorily on the USPA A-license check dive. This temporary USPA A license expires 60 days from the date signed.

*Valid for 60 days.
(Stamp not required for registration at USPA Headquarters.)*

PAYMENT

\$ _____ License Fee (\$43)

\$ _____ Expedite with email confirmation (add \$20)

\$ _____ Total

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

	U.S.	Foreign
American Express	✔	✔
Discover	✔	✔
Mastercard	✔	✔
Visa	✔	✔
Check or Money Order (payable to USPA)	✔	✘

X _____ Card Holder Signature

Submit via:
 Mail: USPA, 5401 Southpoint Centre Blvd. Fredericksburg, VA 22407. (Do not send original, please send photocopy.)
 Email: membership@uspa.org
 Fax: (540) 604-9741 (Please call (540) 604-9740 to confirm transmission was received and legible.)