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| --- | --- | --- | --- | --- | --- | --- | --- |
| Service No: | Rank: | | Name: | | | Initials: | |
| Station/Unit: | | Tel No: | | | | | Date of Birth: |
| First Name: | | Date in Post: | | | | Expected Date of Posting: | |
| Address for Correspondence: | | | | | | | |
| Email Address: | | | | | | | |
| I hereby apply for a Malcolm Club Gliding Award under the terms of the current DCI. I have been present at a Service Gliding Club during a flying day immediately prior to this application. Comments from a Club official are displayed overleaf. My previous flying and gliding experience is: | | | | | | | |
| Powered Flying hours: | | | | Types of aircraft flown: | | | |
| Gliding hours: | | | | Glider types flown: | | | |
| Number of glider launches: | | | | Type of award being applied for eg Solo, Bronze C etc | | | |
| Previous solo information (date, location, aircraft type) | | | | | | | |
| Any other details: | | | | | | | |
| The reason I wish to be given a Malcolm Club Gliding Award is: | | | | | | | |
| Date: | | | | | Signature: | | |

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| This is to confirm that .......................................(rank and name) was on the gliding field at ...................... (site) for .....................(time) and was shown or participated in the following activities: | | | |
| Additional Comments: | | | |
| Signature: | | Name: | |
| Date: | Club: | | Contact No: |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Flt Cdr/Sqn Cdr/OC Wg Comments: (Please comment on the applicants motivation toward flying, his personal qualities and his performance at work): | | | | |
| Signature: | | | Name | |
| Date: | Rank: | Appt: | | Tel Ext: |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sqn Cdr/ OC Wg / Station Commander’s comments:  I endorse this application for a Malcolm Club Gliding Award and offer the following comments: | | | | |
| Signature: | | | Name | |
| Date: | Rank: | Appt: | | Tel Ext: |