



## Application for the recognition of foreign licences / training content

DHV membership number .....

Last name .....

First name .....

Date of birth ..... Place of birth .....

E-Mail address .....

**I am applying for the facilitated training / examination for an EHPU-  
IPPI Card Level 5 holder**

**1.** Registration in DHV service portal with your current contact details:  
<https://service.dhv.de/db2/>

**2.** Demonstration of flying proficiency at a DHV-approved school to  
determine practical proficiency.

Date .....

**2.1** If the practical skills do not meet the requirements for a pilot with  
a German B license, a corresponding practical retraining must be  
completed.

Date .....

**3.** Technical discussion with the training supervisor or an assigned  
flight instructor of the school to determine expertise in A and B level.

Date .....

**3.1** If the expertise does not meet the requirements, a corresponding  
retraining must be completed.

Date .....

### Confirmation of passing the examinations / retraining courses

Name of the school .....

Date, place .....

License number of the training supervisor .....

Signature .....

*The following documents must also be submitted during the  
subsequent examination: copy of the foreign licence, copy of the IPPI  
Card*

**4.** Theory test for the A licence with a DHV pilot examiner

Date and number of examination .....

**5.** Practical exam for the A licence with a DHV pilot examiner

Date and number of examination .....

**6.** Theory test for the B licence with a DHV pilot examiner

Date and number of examination .....

**7.** Documentation of a cross-country flight according to the training  
and examination regulations of the DHV through an illustration of the  
evaluation of the igc file.

*Complete documentation is a prerequisite for an admission to the exam. The fees for  
the examination and the issuance of the licence are to be paid at the time of the  
examination. The fee for the recognition procedure will subsequently be invoiced by  
DHV.*

Date, place .....

Signature of the applicant .....