

IACRA Tips & Suggestions

Last updated: September 7, 2020

To the applicant:

The information in this document is not meant to be a complete guide for using IACRA. Instead, this is supplemental information that I am providing to help you correctly complete your IACRA application before each practical test (AKA checkride). Your flight instructor should also use this document to carefully check your application before signing it. My hope is that this will save valuable time and reduce your stress level at the beginning of each checkride.

There are several other important items that are not addressed in this document because I usually find those items to be completed correctly.

Links to official IACRA help documents are available at: <https://iacra.faa.gov/>

Please contact me via email, phone, or text if you have questions, corrections, or other comments related to this document.

Thank you!

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The tips and suggestions below are based on the **red letters** shown in this graphic:

Airman Certificate and/or Rating Application

I. APPLICATION INFORMATION (Mark 'X' in all the blocks applicable to the certificate or rating for which you are applying):

Certificates	Ratings	Other Information/Requests
Pilot <input type="checkbox"/> Student <input type="checkbox"/> Recreational <input type="checkbox"/> Flight <input type="checkbox"/> Private <input type="checkbox"/> Commercial <input type="checkbox"/> Ground <input type="checkbox"/> ATP-Restricted <input type="checkbox"/> ATP	instructor: <input type="checkbox"/> ASE <input type="checkbox"/> AME <input type="checkbox"/> Land <input type="checkbox"/> Sea <input type="checkbox"/> Helicopter <input type="checkbox"/> Balloon <input type="checkbox"/> Glider <input type="checkbox"/> Gyroplane <input type="checkbox"/> Airship <input type="checkbox"/> Powered-Lift Type Rating: <input type="checkbox"/> Added Rating	Instrument: <input type="checkbox"/> Airplane <input type="checkbox"/> Basic <input type="checkbox"/> Helicopter <input type="checkbox"/> Advanced <input type="checkbox"/> Powered-Lift <input type="checkbox"/> Instrument Ground Instructor: <input type="checkbox"/> Initial <input type="checkbox"/> Reexamination <input type="checkbox"/> Instrument Proficiency Check <input type="checkbox"/> Renewal <input type="checkbox"/> Reissuance <input type="checkbox"/> Medical Flight Test <input type="checkbox"/> Reinstatement <input type="checkbox"/> Flight Review <input type="checkbox"/> Limitation Removal Specify other: <input type="checkbox"/> IPL

A. Name (Last, First, Middle) B. SSN (US Only) **A** C. Date of Birth D. Place of Birth (City and State) or (City and Country) **B**

E1. Residential Address (Including City, State, Zip Code, and Country) **C** E2. Mailing Address (This address will be printed on the permanent airman certificate, if different than block E1.) F. Citizenship / Nationality
 USA Other G. Do you read, speak, write, & understand the English language? Yes No
 specify: H. Height (inches) **D** I. Weight (pounds) J. Hair Color K. Eye Color L. Sex Male Female

M. Do you hold, or have you ever held an FAA pilot certificate? Yes No M1. Grade of Certificate M2. Certificate Number M3. Date Issued
 N. Do you hold, or have you ever held a Medical Certificate? Yes - FAA Yes - Foreign Yes - Military No N1. Class of Certificate N2. Name of Medical Examiner **E** N3. Date Issued

O. Have you ever been convicted for violation of any Federal or State statutes relating to narcotic drugs, marijuana, or depressant or stimulant drugs or substances? Do not include alcohol offenses involving motor vehicle mode of transportation as those offenses are covered on the FAA Form 8500-8, Airman Medical Application Form. Yes No O1. Date of Final Conviction

II. CERTIFICATE OR RATING APPLIED FOR ON BASIS OF:

A. Completion of Test or Activity 1. Aircraft to be used (if flight test required) **F** 2. Total time in this aircraft and/or approved FFS or FTD (hours): a. Flight Time **G** b. As Pilot-in-Command **H**

B. U.S. Military Competence or Experience 1. U.S. Military Service 2. Date Rated in U.S. Military 3. Rank or Grade

C. Graduate of an Approved Course **I** 4. List Military aircraft for which you have:
 a. logged pilot time or provided flight instruction (IP) (make and model) b. passed an Instrument Proficiency Check (Pilot or CFI) - (make and model)

D. Holder of Foreign License 1. Training Agency or Training Center: 1a. Name 1b. Location (City and State) 1c. Certification Number 1d. Part 142? Yes No
 2. Curriculum From Which Graduated (Level, Category, and Class and/or Type Rating) 3. Date

E. Air Carrier Training Program 1. Country that Issued the Foreign Pilot License 2. Grade of Foreign Pilot License 3. Foreign Pilot License Number
 4. Ratings Held on Foreign Pilot License (FAA equivalent only - e.g. ASE/L, AMEL, Type rating, etc.)

E. Air Carrier Training Program 1. Name of Air Carrier 2. Date Training Began 3. Accomplished Training Program Initial Upgrade Transition Recurrent

III. RECORD OF PILOT TIME (Do not write in the shaded areas)

	Total	Instruction Received	Solo	PIC and SIC	Cross Country Instruction Received	Cross Country Solo	Cross Country PIC/SIC	Instrument	Night Instruction Received	Night Take-Off / Landing	Night PIC/SIC	Night Take-Off/Landing PIC/SIC	Number of				
													Flights	Aero-Tows	Ground Launches	Powered Launches	
Airplanes	J	K	L	M				N									
Rotorcraft																	
Powered Lift																	
Gliders																	
Lighter-Than-Air																	
FFS																	
FTD																	
ATD	P	Q						R									

Class Totals				
	SEL	MEL	SES	MES
Airplane	O			
Rotorcraft				
Lighter-than-air				
FFS				
FTD				
ATD				

IV. Have you previously received a Notice of Disapproval or been denied for any reason for the certificate AND/OR rating for which you are applying? Yes No

V. APPLICANT'S CERTIFICATION: I certify that all statements and answers provided by me on this application form are complete and true to the best of my knowledge and I agree that they are to be considered as part of the basis for issuance of any FAA certificate to me. I have received the Pilot's Bill of Rights Written Notification of Investigation that accompanies this form. I have also read and understand the Privacy Act statement that accompanies this form.

Signature of Applicant Date

A

The SSN is not required. If you have one, I suggest checking the box in IACRA that says, “Do Not Use.”

B

Be sure to enter your place of birth, not your current place of residence.

C

Enter your current residential address. If you have moved since your last FAA application was submitted, you should update your address at

https://www.faa.gov/licenses_certificates/airmen_certification/update_address/ per FAR 61.60 before submitting an application.

D

Ensure these items are correct and match your previously issued FAA certificate. It’s okay for your weight to fluctuate, but your height, hair color, eye color, and sex should match.

E

Ensure this matches exactly what is printed on your medical certificate.

F

Items F, G, and H are about the aircraft being used for your checkride. This row corresponds to section 2 of the IACRA application. If using a Cessna 172 for the checkride, I recommend searching for “CE-172” and then selecting the first one on the list (CE-172-172). This option is best because it represents all models of 172s.

G

This is your total flight time in the make/model of airplane entered for item G. If all of your flight experience is in this type of airplane, this number should be the same as item J.

H

This is your total PIC time in the make/model of airplane entered for item G. If all of your flight experience is in the same type of airplane, this number should be the same as item M.

I

If you graduated from a part 141 course, ensure all of the information in this section (including the graduation date) matches your signed graduation certificate. Be sure to also bring that signed certificate to your checkride.

Items J through S correspond to section 5 of the IACRA application. It's a bit confusing, but basically each column in section 5 of IACRA corresponds to one of the rows shown on the printed application.

J

This is your total time in all types of airplanes. If you have flown more than one make/model, this number should be larger than the number entered for item G.

If you are a private pilot applicant on your first checkride: $K + L = J$

If you have done one or more checkride flights (PIC, but not dual or solo) in the past and have not done any other non-training flights (not dual/solo): $K + L + \text{your checkride flights} = J$

K

Enter total instruction received in all **airplanes**. This number must be smaller than item J. **Do not include sim time** (ATD or FTD) here. It's okay to log sim time as dual instruction in your logbook, but you need to subtract that out before entering this number.

L

Solo = Sole occupant of the aircraft. Only enter the time that you flew by yourself.

M

This includes all time that you *acted* as PIC and all time that you *logged* PIC. [Here's a good article](#) that explains what that means.

If you are a private pilot applicant on your first checkride: M will be the same as L

N

This is all instrument time in airplanes (simulated + actual). Do not include sim time (ATD or FTD) here.

O

This is all PIC time in single-engine land (SEL) airplanes. For most applicants, this should be the same as items H and M.

P

Only log time in FAA approved sims. If you used one or more sims during your training, you need to determine if they are an FAA approved ATD or FTD. The differences are confusing, but important. Your instructor and/or school manager should be able to help. There should also be an FAA letter of authorization (LOA) with each approved sim. Enter the total sim time in the appropriate box. Leave blank if you have zero sim time.

Q

This is total dual instruction received in the sim (ATD and/or FTD). For most applicants, it will be the same at item P. Leave blank if you have zero sim time.

R

This is time in the sim (ATD and/or FTD) when instrument conditions were being simulated. If your instructor always started the sim and put it right in instrument conditions, or only logged the time you were flying in instrument conditions, this number may be the same at P and Q. Otherwise, this number should be something less than P and Q. Leave blank if you have zero sim time.

S

Enter the total single engine (SE) time in the sim (ATD and/or FTD). For most applicants, this will be the same at items P and Q. Leave blank if you have zero sim time.

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