

Who completes this form: the applicant (Part A) and an appropriately authorised Tandem Instructor Assessor (Parts B–F). Cross-credit of a non-NZPIA tandem rating is applied for on the electronic cross-credit form, not this form. Attach extra pages if needed.

References: chapter 8 of the current NZ Skydiving Documents Manual (DM), the equipment manufacturers' manuals (latest revision) and applicable CARs. The manuals are updated regularly; where they differ from this form, the current manual prevails.

Part A – Applicant's Details *(applicant to complete)*

First & middle names		Last name	
Date of birth	<i>dd/mm/yyyy</i>	NZPIA No.	<i>if known</i>
Email		Phone	
Physical address in NZ	<i>Address for service – must be in New Zealand and not a PO Box</i>		
Postal address	<i>if different, incl. suburb, city and post code</i>		
Medical certificate no. / class		Medical expiry	<i>dd/mm/yyyy</i>

Equipment type rating(s) applied for: ☐ Vector type ☐ Sigma ☐ Strong ☐ Racer ☐ Other: _____

Type ratings are available for equipment types in common use (DM 8.5). A tandem master rating is only valid with at least one equipment type rating.

Part B – Prerequisites *(assessor to verify before assessment begins)*

Requirement	DM ref	Minimum	Candidate actual / evidence	Met
Identity confirmed – identification matches Part A	2.6	—		☐
At least 18 years old	8.2	18		☐
Holds a valid NZPIA parachutist certificate with 'D' endorsement, or a commercial parachutist certificate	8.2	D / CPC		☐
Holds a valid medical certificate acceptable to the Director of Civil Aviation	8.2	—		☐
Active in the parachuting industry for at least two years since first (logged) training jump	8.2	2 years		☐
Completed at least 750 freefall descents	8.2	750		☐
At least 50 descents and 30 minutes of freefall time in the previous 12 months	8.2	50 / 30 min		☐
Passed the NZPIA exams applicable to the assessment, including equipment-specific exams	8.2	70%		☐
Fit and Proper Person Declaration (Form PIA01) attached, or one made within the preceding 2 years	8.2	—		☐

Supporting documents checklist (assessor to ensure these are attached before submitting)

Attach copies of the following documents as evidence of the prerequisites above. Applications received without them will not be processed.

Requirement	Supporting document(s) to attach	Attached
Holds a valid medical certificate acceptable to the Director of Civil Aviation	Copy of the current medical certificate (showing class and expiry date)	☐
Active in the parachuting industry for at least two years since first (logged) training jump	Copy of the logbook page (or other record) showing the date of the first logged training jump	☐
Completed at least 750 freefall descents	Copy of the most recent logbook page showing the total number of freefall descents	☐
At least 50 descents and 30 minutes of freefall time in the previous 12 months	Copies of the logbook pages (or drop zone records) for the previous 12 months, showing the number of descents and total freefall time	☐
Fit and Proper Person Declaration (Form PIA01) attached, or one made within the preceding 2 years	Completed Form PIA01, or the date of, and application with which, a PIA01 was made within the preceding 2 years	☐

Part C – Ground and Theory Assessment (DM 8.7)

Competency must be demonstrated in all areas below before freefall assessment jumps are authorised.

Ref	Assessment area	Assessor notes	Satisfactory	Assessor initials & date
8.7	Tandem equipment familiarity, packing and maintenance (type-specific)		☐	
8.7	Passenger briefings – content, delivery and clarity		☐	
8.7	Passenger gear-up and pre-jump gear checks		☐	
8.7	Exit and aircraft procedures, including aircraft emergencies		☐	
8.7	Freefall skills (ground component – theory and drills)		☐	
8.7	Malfunctions and emergencies – recognition, decision-making and response		☐	
8.7	Administration and regulations, including rating limitations and currency requirements		☐	

Part D – Freefall Assessment (DM 8.7.1)

All tasks are carried out under the supervision of the tandem instructor assessor, within a minimum of five and a maximum of eight assessment jumps. A candidate who cannot complete the assessment in eight jumps must make at least 100 solo descents before being assessed again from the start. The solo jump and the passenger-position jump are not required for re-currency assessments.

Jump 1 – Solo familiarisation jump on the equipment type (assessor may act as passenger, or ballast may be added if under the manufacturer's minimum exit weight)

Date	Drop zone	Aircraft / altitude	Delay (sec)	Passenger	Sat.
					☐
Assessor comments:				Assessor initials:	

Jump 2 – Jump in the passenger position with a current tandem master

Date	Drop zone	Aircraft / altitude	Delay (sec)	Passenger	Sat.
					☐
Assessor comments:				Assessor initials:	

Jump 3 – Stable exit and heading control

Date	Drop zone	Aircraft / altitude	Delay (sec)	Passenger	Sat.
					☐
Assessor comments:				Assessor initials:	

Jump 4 – Alternating 360° turns in drogue fall

Date	Drop zone	Aircraft / altitude	Delay (sec)	Passenger	Sat.
					☐
Assessor comments:				Assessor initials:	

Jump 5 – Unstable exit, regaining stability within 10 seconds

Date	Drop zone	Aircraft / altitude	Delay (sec)	Passenger	Sat.
					☐
Assessor comments:				Assessor initials:	

Jump 6 – Tandem-terminal jump demonstrating heading control and alternating 360° turns

Date	Drop zone	Aircraft / altitude	Delay (sec)	Passenger	Sat.
					☐
Assessor comments:				Assessor initials:	

Jump 7 – Spare jump (if required) – task(s) repeated: _____					
Date	Drop zone	Aircraft / altitude	Delay (sec)	Passenger	Sat.
					☐
Assessor comments:				Assessor initials:	

Jump 8 – Spare jump (if required – maximum 8 jumps in total) – task(s) repeated: _____					
Date	Drop zone	Aircraft / altitude	Delay (sec)	Passenger	Sat.
					☐
Assessor comments:				Assessor initials:	

Overall comments	
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Part E – Canopy Proficiency Assessment (DM 8.7.2)

All tasks are carried out under the supervision of the assessor but without assessor assistance, and may be completed at any stage of the training or the proficiency jumps after rating issue. The candidate must land within 50 m of a target on all canopy proficiency jumps. The assessor must be able to re-take control of the parachute at all times.

#	Task	Key performance elements (DM 8.7.2)	Assessor notes	Sat.	Assessor initials & date
1	Sweet spot	Release brakes, check canopy; identify flight line and orient to landing area; adjust passenger, staged flare; pattern and straight-in approach		☐	
2	Stall and flare technique	Full brakes 8–10 sec → stall; return to full flight, observe surge; two-stage flare, lean back; stop by 2,000 ft; identify turbulent areas		☐	
3	Flight cycle and half-braked flares	¾ brakes 8–10 sec then full flight; ½ brakes 3–4 sec, dynamic flare; stop by 2,000 ft; assess lift/sink		☐	
4	Turn recovery to flare	90° turn → 180° opposite; neutralise, symmetrical flare; repeat both sides; stop by 3,000 ft		☐	
5	Sink / surge and sashay	¾ brakes → surge, flare after 4–5 sec; add 90° turns before surge; stop by 2,000 ft		☐	
6	Flat turns and half-braked approach	Observe traffic; 45° flat turns, flare after each turn; half-braked approach, resume full flight no lower than 200 ft		☐	
7	Stacking and communication	Compare descent rates; hold ½ brakes to create separation; pass on level canopy using descent-rate-increasing turns; order by 2,000 ft		☐	
8	Penetration checks and crabbing	Full flight to check penetration; crab right and left; disconnect RSL; stop by 1,500 ft		☐	

AFTER RATING ISSUE (DM 8.1.2, 8.4, 8.5)

Proficiency jumps: at least five tandem descents with a passenger holding at least a 'B' endorsement under the supervision of a tandem I/E or instructor assessor before carrying uncertificated passengers; then a further 15 tandem descents under the supervision of a tandem master with no limitations on their rating; then an NZPIA proficiency test. All proficiency jumps must be documented in accordance with DM 2.9.2.

Type ratings: the tandem master may only jump the equipment type(s) they are rated on, except under tandem I/E supervision when training for a type rating.

Hire and reward: tandem descents for hire and reward also require a CAR Part 115 certificate, an NZPIA commercial parachutist certificate and a medical certificate acceptable to the Director.

Part F – Declarations *(applicant and assessor)*

Declaration by the Applicant

I declare that all details in this application are true and correct. I understand that to exercise the privileges of an NZPIA certificate, endorsement or rating in New Zealand I must comply with NZPIA's standards and procedures and all applicable Civil Aviation Rules.

Signature

Date

Declaration by the Tandem Instructor Assessor

I declare that the information above is true and correct to the best of my knowledge; that I am appropriately authorised (DM chapter 17), qualified and current to make this assessment; that the candidate has met all the requirements for the document sought; and that the assessment was carried out and documented in accordance with NZPIA standards and procedures (DM chapters 2.7 – 2.9).

Signature

Name

NZPIA No. /
AP No.

Date

WARNING

Providing false or misleading information, or failing to disclose information relevant to the grant or holding of an aviation document, is an offence under the Civil Aviation Act 2023 and may lead to the document being suspended or revoked.

Submitting: Return this form and all supporting documents listed in the Part B checklist to ceo@nzskydiving.org. A Fit and Proper Person declaration is valid for two years: attach a completed Form PIA01 if you have not made one in the preceding two years. A new declaration with every application is recommended.

Privacy: NZPIA collects this information to assess your application and to keep the records it must hold as a CAR Part 149 organisation. It is stored securely and handled in accordance with the Privacy Act 2020. You may ask to see or correct the information NZPIA holds about you.

NZPIA use only

Date received		Fee received	☐ Yes ☐ N/A
FPP declaration reviewed	☐ Yes ☐ N/A	Exam result(s) verified	☐ Yes
Medical certificate sighted	☐ Yes	Type rating(s) endorsed	
Decision	☐ Issued ☐ Further information requested ☐ Referred to Director		
Document no. / date issued		Database updated	☐ Yes
Delegation holder (name)		Signature / date	