



USPPA/USUA Rating Application

931 W. 75th St. #137-150, Naperville, IL 60565
Phone 866-37-USPPA (866-378-7772) | Fax 866.226-2990
email: info@usppa.org, info@usua.org | web: www.usppa.org



USPPA Rating applications should be submitted to the address above and USUA ratings should be mailed to the USUA.org address.

1 General Data

USPPA/USUA (circle one) Member# _____. Please also enter the information below to insure better insure accuracy. Tandem Rating requires USPPA membership.

Name _____ Phone #'s _____

Street Address: _____

City _____ State: _____ Zip code: _____

2 Pilot Ratings

Solo Rating sought: PPG1 PPG2 PPG3 Instructor

Solo Launch Skill: FL WL (foot launch or wheel launch)

Tandem Rating sought: Tandem Trainee (TT) Tandem Instructor (TI)

Test Score (written test) _____ FOI Score (if read) _____ First Aid/CPR date (if read) _____

Please note: Completion of Syllabus is required for all ratings

3 Instructor/Student

I hereby certify that the above individual has received the training as prescribed, has completed the appropriate syllabus with all initials by student and myself, has passed all required tasks and has demonstrated competence at the level indicated by the rating.

Instructor/Admin Signature: _____ Date: ____/____/____

Instructor/Admin Name: _____, Member# _____

School: _____ Hours/Days of training given: _____ (Hours/Days)

Student Signature: _____ Date: ____/____/____

I have gone through the appropriate USPPA Syllabus for the rating sought, initialling each section

Note: Any required documentation, such as instructor commitment and waiver must be received before a permanent rating card is issued.

4 Prior Ratings

Current paraglider or powered paraglider ratings and experience from other organizations:

Organization (circle) USHPA / USUA / EAA / ASC, ratings _____

Member Numbers (list org followed by number): _____

PPG Solo Flts _____(FL), _____(WL); PPG Foot-launched Tandems given _____;

PG Flts _____, Tandems _____

Temporary Ratings Card

Date on temporary must be the same as on application



Valid for 90 days while membership remains current.

Fly safe, represent your fellow pilots well, and enjoy!

Temporary Pilot Rating Card

Pilot Name

Meets the requirements and has successfully earned a PPG _____ rating
(1, 2, 3, Instr, TT, or TI)

with _____ (FL/WL) Launch Skills

on ____/____/____ as administered by

Mem# _____

Instructor/Administrator Name, Organization & Member Number