



SSA Award Application

Submit by mail to:
SSA, PO Box 2100
Hobbs, NM 88241
Attn: Badge Claims

For any flight documented by approved data recorder, please attach both pages of a completed SSA Badge & Record Worksheet.

I. PILOT INFORMATION: non-members please enclose \$20 fee for processing FAI badge claims

(a) Pilot: Clemens Ceipek Date of Birth: _____ SSA Member #: _____
(b) Address: _____ City: Boulder State: CO Zip: 80302
(c) E-mail: clemens.ceipek@gmail.com

II. PILOT CERTIFICATION: I hereby certify this flight was conducted in accordance with the FAI Sporting Code, in compliance with all the glider manufacturer's and national operating limitations, and in accordance with national flight regulations respecting airspace use, night flight, etc. I apply for the award(s) checked below.

Pilot Signature: Date: Sep 3, 2019

- Altitude Claim(s): Silver Gold Diamond Symons Wave (\$40 fee applies)
- Duration Claim: Silver/Gold
- Distance Claim(s): Silver Gold Diamond Goal Diamond Distance
- Diplome Claim: 750 km 1000 km 1250 km Other Diplome: _____ km
- Other Awards Barringer Trophy Century Award (Pilot age 20 or younger)
- *See program rules *State Record(s) *SSA Distance Award (\$10 fee applies)

III. FLIGHT DATA SUMMARY

(a) Flight Date: Aug 12, 2019 Is the aircraft a motor glider? YES NO
(b) Aircraft Make & Model: Discus CS N#: N42CA
(c) Take Off Site: KBDU State: CO Elevation: 5288 MSL
(d) Time of release (or last motor glider Means of Propulsion use), Local time: 10:23
(e) Landing Site: KBDU State: CO Elevation: 5288 MSL
(f) Landing time (end of the ground roll), Local time: 17:24

IV. OBSERVER CERTIFICATION: Check ONE and complete:

- GPS data supports this application; I provided supervision of this flight as required by Sporting Code Section 3, and have attached the SSA Badge & Record Worksheet I completed.
- This application is for Silver Duration only and I provided the continual attention required to confirm 5 hours were flown.

OBSERVER'S NAME (please print) Armand Charbonneau SSA MEMBER #: _____
SIGNATURE: E-MAIL: abcsoaring@gmail.com

Office Use Only

Hold Date _____ Approval Date _____ By _____ Letter Date _____ Soaring Pub _____ Denial Date _____ SC3 Reason _____

SSA BADGE & RECORD WORKSHEET

COMPLETE ALL ITEMS use N/A for "Not Applicable."

The written declaration below is valid for all but World Records, if completed *and signed before takeoff and, if using an IGC Approved Flight Recorder, after (1) turning the FR on; (2) entering an electronic task if desired - then leave the FR on!*

PRE-FLIGHT DECLARATION & EQUIPMENT CHECK

FLIGHT DATE: <input type="text" value="Aug 12, 2019"/>	OO NAME: <input type="text" value="Armand Charbonneau"/>
PILOT NAME: <input type="text" value="Clemens Celpek"/>	AIRCRAFT Make/Model: <input type="text" value="Discus CS"/>
IN-FLIGHT CREW: <input type="text" value="none"/>	AIRCRAFT Registration #: <input type="text" value="N42CA"/>

OO: Complete for GPS Claim

- 1a. Recorder serial # & installation checked; recorder sealed to the glider. **OR** 2. Recorder serial # & installation checked and aircraft continuously observed until takeoff.

TASK required for all distance flights except (1) Straight Distance from release to landing or Finish Fix; or (2) Free records

Way Point	Location Name	Latitude (DD:MM.mmm)	Longitude (DDD:MM.mmm)
1. Start Point	<input type="text" value="512: Nugget Ridge (OLC Start)"/>	<input type="text" value="N40:05:44"/>	<input type="text" value="W105:22:40"/>
2. Turn Point	<input type="text" value="744: WdIndPark"/>	<input type="text" value="N38:59:38"/>	<input type="text" value="W105:03:42"/>
3. Turn Point	<input type="text" value="730: Toponas"/>	<input type="text" value="N40:03:25"/>	<input type="text" value="W106:47:57"/>
4. Turn Point	<input type="text" value="720: SquawMt"/>	<input type="text" value="N39:40:59"/>	<input type="text" value="W105:29:59"/>
5. Finish Point	<input type="text" value="637: KennyMt"/>	<input type="text" value="N40:17:29"/>	<input type="text" value="W105:24:58"/>

Pre-Flight signatures are required, with date and time Certified by the OO

Pilot Signature:

OO Signature: Date & time of OO's Signature:

If START and FINISH points are selected post-flight:

Location Name (if available)	Latitude (DD:MM.mmm)	Longitude (DDD:MM.mmm)
Start Point _____	_____	_____
Finish Point _____	_____	_____

POST-FLIGHT EQUIPMENT CHECK

OO: Check one of the following to verify:

- 1a. Recorder/aircraft seal applied during pre-flight and verified intact post-flight.
- OR**
- 1b. If no pre-flight recorder check was done, continuous observation was provided from landing until the post flight installation check.

OO: Check each of the following to verify:

2. Performed or supervised download & retained the original data file(s).
3. File security checked using proper software.
4. Take off & landing time(s) & location(s) confirmed.

FLIGHT DATE: Aug 12, 2019 **OO NAME:** Armand Charbonneau
PILOT NAME: Clemens Ceipek **AIRCRAFT Registration #:** N42CA

OFF-FIELD LANDING: Certification by 1 Observer or 2 other witnesses As Needed

I hereby certify I witnessed the above pilot and aircraft at the date, time and location shown below:

Date: _____ **Local Time:** _____ **Location:** _____
Signature: _____ **Signature:** _____
Name: _____ **Name:** _____
Address: _____ **Address:** _____

OO CONFIRMATION OF TAKE OFF & LANDING TIMES & LOCATIONS Required

Take off Time (Local): 10:10 **Take off Site:** KBDU
Take off Site Elevation MSL: 5288 **Nearest City:** Boulder **State:** CO
Confirmed by: OO's Personal Observation Soaring Site log Witness
Landing Time (Local): 17:24 **Landing Site:** KBDU
Landing Site Elevation MSL: _____ **Nearest City:** Boulder **State:** CO
Confirmed by: OO's Personal Observation Soaring Site log Witness

CONFIRMATION OF RELEASE LOCATION As Needed

Required if the time & location of release are not evident in R-recorded data. List the location as accurately as possible; if overhead at an airport, list published airport coordinates.

I hereby certify the following as the release location for the flight listed at the top of this page:

Latitude (DD:MM.mmm): N40:06:25 **Longitude (DD:MM.mmm):** W105:19:18
Tow Pilot / Launch Supervisor Name: _____
Tow Pilot / Launch Supervisor Signature: _____

ALTITUDE EVALUATION Required

Refer to the SSA Badge & Record Guide to find altitudes MSL, corrected for both instrument error and non-standard pressure

ALL CLAIMS: Release: 10134 **ALTITUDE CLAIMS: Low Point:** 9823 **High Point:** 17191
DISTANCE CLAIMS: Start Altitude: 10416 **Finish Altitude:** 12037

OO 's Claim Submission Checklist Required

- 1. Flight Recorder calibration is current
- 2. Recorded data proves soaring performance consistent with the Badge leg(s) and/or Record(s) sought
- 3. Materials submitted to SSA:
 - BOTH pages of this worksheet
 - SSA Award Application and, if applicable: record form(s), SSA Distance Award Application
 - Data recorded in flight (eg: CD, memory stick or memory card)
 - A copy of FR calibration data
 - The OO's written explanation for any unusual aspect of the flight or its documentation



NaviterOudie-IGC 1.9.2017 SN#96C(11892)

Certificate of calibration

Indicated	Etalon	Correction
9500m	1000m	1m
9000m	2000m	2m
	3000m	3m
8500m	4000m	1m
	5000m	0m
	6000m	-3m
8000m	7000m	3m
	8000m	-3m
7500m	9000m	-3m
	8002m	-2m
	7000m	6m
7000m	6000m	0m
	5000m	4m
6500m	4000m	5m
	3000m	6m
6000m	2000m	4m
	1000m	3m

