

Send to:  
[post@nlf.no](mailto:post@nlf.no) (pdf format only) or  
**Norges Luftsportforbund**  
**Møllergata 39**  
**8001 OSLO**

Til bruk i forbindelse med språkprøve for  
flytefonistrettighet jf. BSL D 4-8 § 4-3 bokstav b.

### Language Proficiency Assessment (LPA) Form

|                                     |               |                  |
|-------------------------------------|---------------|------------------|
| PersonID                            | Date of birth | State of issue   |
| Last name                           |               | First name(s)    |
| Address                             |               | Zipcode and city |
| Phone                               |               | E-mail           |
| Date and signature of the applicant |               |                  |

Initial     
 Revalidation     
 Renewal - *Attach copy of Flight Logbook from end of validity of LPA.*

Language Proficiency Rating Scale  
*Grading 1 = Pre elementary 2 = Elementary 3 = Pre-operational 4 = Operational 5 = Extended 6 = Expert*

| Assessment | Pronunciation |       | Structure |       | Vocabulary |       | Fluency |       | Comprehension |       | Interactions |       |
|------------|---------------|-------|-----------|-------|------------|-------|---------|-------|---------------|-------|--------------|-------|
|            | En            | Other | En        | Other | En         | Other | En      | Other | En            | Other | En           | Other |
| Grading    |               |       |           |       |            |       |         |       |               |       |              |       |

|                | English (En) | Other ..... |
|----------------|--------------|-------------|
| Final grading: |              |             |
| Expiry date:   |              |             |

Level 4 – valid 3 years. Level 5 – valid 6 years. Level 6 – valid 6 years.

|                                       |                       |
|---------------------------------------|-----------------------|
| Place and date of assessment          | Assessor PersonID     |
| Name of assessor (in capital letters) | Signature of assessor |

**All attached copies shall be readable and in colour.  
Please note that failure to submit all required documentation  
may result in the return of your application**