

Application for Initial Assessment of Competence (AoC) and Initial Issue of Examiner Certificates for: SFE, TRE or CRE (3rd Country Licence Holders only), (Aeroplanes/Helicopters/Powered Lift)

Commission Regulation (EU) 1178/2011, Annex 1, Sub-Part K



Please complete the form in **BLOCK CAPITALS** using black or dark blue ink after reading the attached guidance.

FALSE REPRESENTATION STATEMENT
 It is an offence under Article 231 of the Air Navigation Order 2009 to make, with intent to deceive, any false representation for the purpose of procuring the grant, issue, renewal or variation of any certificate, licence, approval, permission or other document. This offence is punishable on summary conviction by a fine up to £5000, and on conviction on indictment with an unlimited fine or up to two years imprisonment or both.

1. APPLICANT DETAILS **To be completed by Applicant**

CAA Personal reference number:

Employer: (if applicable).....

Title: Forename(s): Surname:

Date of birth (dd/mm/yyyy): Nationality:

Town of birth: Country of birth:

Permanent Address:

.....

Country..... Postcode:

Telephone Number: Mobile telephone:

E-mail: Fax Number:.....

2. ADDRESS FOR CORRESPONDENCE (if different from above) **To be completed by Applicant**

Postal Address:

..... Postcode:

3. MEDICAL FITNESS (not applicable for SFE) **To be completed by Applicant**

Class of Medical Certificate held	Date of last Medical	Date of Expiry	CAA use only

4. PARTICULARS OF UK OR NON-UK LICENCES HELD **To be completed by Applicant**

Issuing Authority	Type/Class of Licence	Licence Number	Expiry Date

5. APPLICATION FOR CERTIFICATE **To be completed by Applicant**

Application for SFE CRE (3rd country only) certificate.

TRE Aircraft Simulator OPC SP Ops MP Ops

6. TYPES REQUIRED ON CERTIFICATE **To be completed by Applicant**

Please enter the aircraft type(s) desired for certification.

For TRE	For SFE	For CRE (3rd country only)

7. EXAMINER STANDARDISATION COURSE	To be completed by Applicant
Have you attended an approved examiner standardisation course as required by Part-FCL, FCL.1015?:	Yes No
Dates of the Course:.....	ATO Approval No.:
Name of ATO:.....	
Please provide a copy of the certificate.	
If No, please state name of Organisation conducting the Standardisation Course:	
Dates of the Course:.....	ATO Approval No.:
Name of ATO:.....	
Including Commercial Air Transport content:	Yes No
Including Instrument Rating content:	Yes No

PLEASE NOTE THAT WE WILL ENDEAVOUR TO ARRANGE YOUR ASSESSMENT OF COMPETENCE WITHIN EIGHT WEEKS.

8. LOCATION AND TIMING DETAILS OF ASSESSMENT OF COMPETENCE (AoC)	To be completed by Applicant
Preferred Date for Assessment of Competence:	A/C Type / Simulator Type and Simulator Code (as applicable):
.....
Timings:	Location:.....

Any changes to the AoC plan(s) are to be notified to Flight Crew Standards Support immediately. Cancellations must be made at least five working days prior to confirmed AoC date or the fee may be forfeit.
Please note that the examiner AoC will not proceed until the applicant has been issued with the applicable instructor certificate and the experience requirements have been satisfied.

9. DECLARATION OF APPLICANT
DETAILS TO BE PUBLISHED
I understand that the UK CAA will publish details in accordance with Part ARA.FCL.205.
Please note your personal address details will not be published.
I hereby confirm my compliance with Part-FCL reference FCL1010 & FCL1030 and declare that the information provided on this form is correct.

Signature:	Date:
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PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1

10. CAA USE ONLY	
Date of Issue.....	Enclosures
Checked by	
Loaded by	
Signed by	

11. COURIER CHARGES
Note to all applicants: All original documents submitted by the customer and CAA issued documents, will be sent by secure courier and are subject to the appropriate charge as detailed on our website; please click attached link " Courier Charge ". The courier charge will be added to the relevant charge as per the Personnel Licensing Scheme of Charges and payable with application.
Should you decide that you do not wish to use the courier option, please tick the box below and all documents will be returned by normal post (Second Class). If the documents sent by normal post fail to arrive at your postal address, we will only be able to re-issue the CAA documents, 15 working days after the original date of despatch from our office. A written request and secure courier fee will also be required. The CAA is not liable for any direct or consequential loss or delay that is caused by the use of normal postal services.
If you wish to opt out of document return by secure courier, please tick box.
Please note: The CAA is not liable for any direct or consequential loss or delay that is caused by the Secure Courier Service. Any damage to products received by you must be notified in writing to the CAA no later than 24 hours from the time of signing for the product(s). You must also return the damaged product(s) to the CAA no later than one week from the receipt and in return, we will reimburse the cost of postage. The CAA will assist you with your claim from the Secure Courier Service provider to recover your financial loss. Such claims will be limited to the price of replacement product(s) in line with the courier terms and conditions.

12. CHARGES

The charge(s) required as calculated in accordance with the CAA Personnel Licensing Scheme of Charges (published in CAA Official Record Series 5) (www.caa.co.uk/ors5) to be paid on application are enclosed herewith.

NB: This application will not be processed until the applicable charges have been received.

Total charges included are: £

Where charges are to be paid other than by the applicant, please enter the name of the person/company who is paying:

.....

IMPORTANT NOTES:

- **Additional Charges:** Where the cost of the CAA investigations exceeds the application charge payable, the applicant shall pay additional charges to recover those excess costs incurred by the CAA in accordance with the Scheme of Charges.
- **Overseas Visits:** If a Member or employee of the CAA is required to travel overseas in respect of this application you are advised to read the CAA Scheme of Charges to which this application relates and the section entitled 'Additional charge where functions are performed abroad'. All expenses incurred in pursuance of this application by virtue of travelling overseas will be payable by the applicant on demand.
- **Withdrawal/Cancellation of Application:** In the event that this application is withdrawn by the applicant, a cancellation charge may be levied. The cancellation charge reflects the work carried out by the CAA on behalf of the applicant up to the point of cancellation. Please see the CAA Refunds Policy at www.caa.co.uk/refunds for more information. Where sufficient funds remain from the original application charge, this charge will be deducted from any refund made in respect of the application following cancellation.

13. FINANCIAL DECLARATION

I declare that to the best of my knowledge the particulars entered in Section 19 of this application are accurate.

I enclose payment for the charges payable on application in accordance with the Scheme of Charges (www.caa.co.uk/ors5).

I agree to pay any additional charges which may become payable in respect of this application under the Scheme of Charges.

Name of Applicant:

Signature of Applicant: Date:

PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1

14. SUBMISSION INSTRUCTIONS

- In accordance with the CAA Scheme of Charges "Authorisation and Approval of Persons" as contained in the Air Navigation Order. The new charges as of 1st April each year, will be applicable to all applications received after that date. Please see Official Record Series 5 on the CAA website at www.caa.co.uk/ors5.
- This completed form must be forwarded together with copies of valid ratings/certificates and payments without delay.
by Fax to: 01293 573959
by post to: Licensing & Training Standards (Flight Crew Standards Support), Civil Aviation Authority, Safety and Airspace Regulation Group, Aviation House, Gatwick Airport (South), West Sussex, RH6 0YR.

Please note that failure to submit all of the required documentation will lead to a delay in processing your application.

PLEASE ENTER PAYMENT DETAILS ON FOLLOWING PAGE

Payment Authorisation



This form can be filled in on screen (preferred method) then printed, signed and submitted as instructed. Alternatively, print, then complete in BLOCK CAPITALS using black or dark blue ink

1. APPLICANT DETAILS (The Applicant is the person responsible for payment of CAA charges)

Application for:..... Dated:.....
Original Applicant's Name:
Application Submission Number (ASN):.....or, Application form number (i.e SRGxxxx)
Registered Company or Trading Name: (if applicable)
Contact Telephone Number:

2. PAYMENT DETAILS

a) Payment type (please tick your chosen method of payment).

Visa Mastercard Debit Card Cheque/Banker's Draft Bank Transfer Cash (max.£1000)

The maximum single transaction using a Visa/Mastercard or Debit Card is limited to £25,000.

We do not accept American Express, Diners Club or JCB cards. **Cash payments** will only be accepted in person at Aviation House, Gatwick. Please do not send cash by post.

Cheques shall be made payable to 'Civil Aviation Authority'. Please write the CAA Application Form No. on the reverse of your cheque.

National Westminster Bank plc
Bloomsbury Parr's Branch
PO Box 158
214 High Holborn
London
WC1V 7BX

Account Name: Civil Aviation Authority
Account Number: 36029769
Sort Code: 60-30-06
Swift Code: NWBK GB 2L
IBAN: GB90 NWBK 6030 0636 0297 69

Please supply the following information:

Amount: £ BACS/CHAPS/ASN Reference*:

* When making a bank transfer please instruct your bankers to quote, i) in relation to an offline application, the CAA Application Form number followed by the application date (i.e. SRGXXXX ddmmyyyy) or ii) in relation to an online application, the Automatic Submission Number (ASN) (i.e. CAI-123).

Payer: Payers Email: Date of Transfer:

b) Card Details (for payment by Credit/Debit Card)

Card number:

Expiry date: / Security Code (last 3 digits on signature strip on reverse of card)

Debit cards only:	
Start date: /	Amount: £
Issue No: (if applicable)	

Name (as written on card):
(BLOCK CAPS)

Full postal address of card holder:
..... Postcode:.....

Card holder's signature:

Please tick box if paying with Company Card Company Name:

Do not send credit card details by email. If sending this form electronically, please leave this section blank and we will call you to confirm your card details at the time.