

**Application for Flying Instructor rating**

**(SINGLE PILOT)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Instructions**  **General**   1. This application form will take approximately 10 minutes to complete. Incomplete applications will not be processed. 2. Submit the completed application form to CAAS Safety Policy and Planning Division via email at   [CAAS\_CAPELS\_Helpdesk@caas.gov.sg](mailto:CAAS_CAPELS_Helpdesk@caas.gov.sg)  **Collection**   1. Processing of the application will take approximately 7 working days from the date of submission. You will be notified via SMS when the certificate is ready for collection.   **Supporting Documents Required**   |  |  | | --- | --- | |  | **For CAAS Use** | | ***For All Cases*** | | | Photocopies of existing Flight Crew Licence, associated ratings and Flying Instructor Rating Certificate, if any. |  | | ***For Initial Issue*** | | | Photocopies of Flying Log Book (evidence of completing approved Instructor Course and Tests) |  | | Evidence of Pre-entry results or exemptions, if any, and CAAS approval to attend Flying Instructor Course |  | | ***For Additional Aircraft Type*** | | | Photocopies of Flying Log Book (evidence of completing approved Instructor Course on new Aircraft Type sought and successful Test) |  | | ***For Removal Of Instructor Limitations*** | | | Photocopies of Flying Log Book (evidence of completing the approved Instructor Course and Test) |  | | Evidence of CAAS approval to attend Instructor Course for removal of limitation |  | |

|  |  |
| --- | --- |
| **Part IA – Type of Application (*Please tick the appropriate boxes in each column)*** | |
| 🞎 AFI  🞎 FI | 🞎 Initial issue  🞎 Renewal  🞎 Additional Aircraft Type (Please specify: )  🞎 Removal of limitation ( 🞎 Aerobatics 🞎 Navigation) |

|  |  |  |
| --- | --- | --- |
| **Part IB – Type of Training Authorisation (*Please tick the appropriate box)*** | | |
| I am applying for: | * PPL Training * CPL Training * MPL Training Phase 1 | * Aircraft Rating Training * Instrument Rating Training * Night Rating Training * Assistant/ Flying Instructor Rating Training |

|  |  |  |
| --- | --- | --- |
| **Part II – Applicant Information** | | |
| Name as in NRIC / Passport:  (please underline surname) | | |
| Email address: | | Tel (Home): |
| Tel (Mobile): |
| Mailing  address: | | |
| Organisation: | Licence type & No: | |

|  |  |  |
| --- | --- | --- |
| **Part III – For Initial Issue and Addition of Aircraft Type** | | |
| Aircraft type sought  for Endorsement: | Hours flown as PIC on  aircraft type sought: | Flight instruction hours received  on Instructor Course: |

|  |  |  |
| --- | --- | --- |
| **Part IV – For Removal of Flying Instructor Limitation** | | |
| Aircraft type on which Test  was conducted: | Ground tuition hours received  on approved Course: | Flight instruction hours received  on approved Course: |

|  |  |  |
| --- | --- | --- |
| **Part V – For Renewal of Flying Instructor Rating** | | |
| Aircraft Type sought for Endorsement: | Expiry Date of  FI Rating: | Date of latest  FI Rating Test: |

|  |  |
| --- | --- |
| **Part VI – Declaration and Consent to Disclosure and Collection of Information.** | |
| Please answer all the questions below. If the answer is "Yes", please provide details in the textbox below, otherwise please check "No".   |  |  |  | | --- | --- | --- | |  | **Yes** | **No** | | 1. Have you contravened any provision in the Air Navigation Act or any aviation safety subsidiary legislation that results in imposition of conditions, suspension or revocation of your aviation safety instrument? | □ | □ | | 1. Are you currently or have been disqualified from holding any aviation safety instrument? | □ | □ | | 1. Are you currently being or have you been the subject of any investigation or suspension actions by any civil aviation authority(s)? | □ | □ | | 1. Do you have any history of physical or mental health or serious behavioural problems? | □ | □ | | 1. Are you convicted for any offence, whether or not the conviction was in a Singapore court? | □ | □ |   **If “Yes”, please provide details:**   |  | | --- | |  |  * I hereby declare that I will maintain secrecy of all radiotelephony communications and shall not improperly divulge to any person the purpose or contents of any message which may come to my knowledge in connection with the operation of any radio apparatus on board the aircraft.   I declare to the best of my knowledge and belief that the statements made and the information supplied in this form are complete and correct. I understand that any false representations made by me for the purpose of procuring the Singapore aviation safety instrument is an offence under section 29C(1)(b) of the Air Navigation Act and I may be subject to the penalties stipulated thereunder and any Singapore aviation safety instrument granted pursuant to the application will be revoked.  I agree that CAAS may collect, use, and disclose my personal data to the Government of the Republic of Singapore and other public agencies, and aviation authorities, as provided in this application form, or obtained by CAAS as a result of processing my application for the purposes of assessing my application and the administration of any regulatory document that may be granted by CAAS, verification of regulatory documents issued by CAAS, or enforcing and ensuring my compliance with the relevant transport safety regulatory requirements.   * I agree that CAAS may collect and use my personal data, which includes my contact information (e.g. email addresses, phone numbers and postal addresses) to receive information on aviation-related events and training.   Please visit <https://www.caas.gov.sg/privacy-statement> for further details on our privacy statement. | |
| Signature of Applicant : | Date (dd/mm/yyyy) : | |

|  |  |
| --- | --- |
| **Part VII – For Official Use (delete accordingly)** | |
| 1. Aircraft type endorsed on Licence **YES** / **NO** 2. Log Book Hours verified (for Initial issue/Additional Type) **YES** / **NO / NA** 3. Instructor Rating Recommended by Examiner (Form FC24) **YES** / **NO**   *(****Note:*** *Do not issue AFI / FI Certificate if any* ***‘NO’*** *to the above.)* | |
| Date application received: | Received By: |
| Date applicant notified: | Document issued by: |