

APPLICATION FOR APPOINTMENT AS A SENIOR AUTHORISED FLIGHT EXAMINER



Instructions

General

1. This form will take approximately 10 minutes to complete.
2. All fields in the form must be completed unless otherwise indicated. Incomplete forms will not be processed.
3. The completed form is to be submitted to the CAAS:
*My PEL Hub, Safety Policy and Planning Division, Civil Aviation Authority of Singapore,
 South Finger Pier Level 3, #038-035, Singapore Changi Airport Terminal 2, Singapore 819643*

Collection

4. Assessment of the application would 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 to be Submitted

	For CAAS Use
For Initial Appointment	
A copy of a valid CPL/ATPL (Pages 1 to 4)	
A copy of Certificate of Tests (both Instrument Rating and Aircraft Rating)	
A copy of current Flying Instructor Rating	
A copy of current Authorised Flight Examiner Certificate	
For Reappointment	
A copy of a valid CPL/ATPL (Pages 1 to 4)	
A copy of Certificate of Tests (both Instrument Rating and Aircraft Rating)	
A copy of current Flying Instructor Rating	
A copy of current Authorised Flight Examiner Certificate	
A copy of current SAFE Certificate	
CAAS Form FC37A (Record of Tests/ Checks), supported and certified by the company	
For Change of Aircraft Type	
A copy of a valid CPL/ATPL (Pages 1 to 4)	
A copy of Certificate of Tests (both Instrument Rating and Aircraft Rating)	
A copy of current Flying Instructor Rating	
A copy of current Authorised Flight Examiner Certificate	
A copy of SAFE Certificate on previous aircraft type	

Part I – SAFE Application

Purpose of Application:	<input type="checkbox"/> Initial Appointment	<input type="checkbox"/> Additional Authorisation
	<input type="checkbox"/> Reappointment	<input type="checkbox"/> Change of Aircraft Type
Type of AFE Surveillance Checks Sought for the following Tests:	<input type="checkbox"/> PPL Final Handling Test	<input type="checkbox"/> Aircraft Rating Test
	<input type="checkbox"/> CPL General Flight Test	<input type="checkbox"/> Instrument Rating Test
	<input type="checkbox"/> MPL Final Assessment Test	<input type="checkbox"/> Flying Instructor Rating Test
Aircraft Type Sought for Authorisation :		

Part II – Applicant InformationName as in NRIC/ Passport:
(please underline surname)

Mailing Address:

Tel (Home):

Tel (Mobile):

Organisation:

Email:

Designation:

Part III – Licence Information

Licence Type:

Licence No:

Date of Expiry:

Date of last
Aircraft Rating test:Date of last
Instrument Rating test:Date of
FI Expiry :Date of
AFE Expiry:Date of SAFE Expiry:
(where applicable)**Part IV – Qualifying Requirements**

Date completed CAAS SAFE Induction / Refresher Briefing : _____

Period Served as an AFE: _____

SAFE Surveillance Check was conducted

by _____ on _____

(Name of CAAS Inspector)

(Date)

Part V – Declaration by Applicant

I declare to the best of my knowledge and belief that the information supplied in this form are complete and correct. I understand that any false representation made by me for the purpose of obtaining the SAFE Authorisation is an offence under the Air Navigation Order (ANO) and I may be subject to the penalties stipulated there under and the authorisation granted pursuant to the application will be revoked.

I confirm that I have not been subjected to any technical or disciplinary enquiry in the last 5 years for initial appointment or the last 2 years for reappointment. If yes, the details are as below:

Signature : _____

Date :

Part VI - Declaration by Employer in Support of Application

We support the application for the appointment as a Senior Authorised Flight Examiner (SAFE). He shall be bound by the rules and regulations of CAAS when exercising the privileges of an SAFE. We undertake to inform CAAS when the SAFE is no longer required to exercise his privileges, relinquished his role or ceased to be employed by the organisation. The information provided in this application form has been verified.

Signature : _____

Date :

Name / Designation : _____

Company Stamp :

Part VII – 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 check "No".

	<u>Yes</u>	<u>No</u>
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?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are you currently or have been disqualified from holding any aviation safety instrument?	<input type="checkbox"/>	<input type="checkbox"/>
3. Are you currently being or have you been the subject of any investigation or suspension actions by any civil aviation authority(s)?	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you have any history of physical or mental health or serious behavioural problems?	<input type="checkbox"/>	<input type="checkbox"/>
5. Are you convicted for any offence, whether or not the conviction was in a Singapore court?	<input type="checkbox"/>	<input type="checkbox"/>

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.

(Please check the box below to indicate your preference)

- 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 our <https://www.caas.gov.sg/privacy-statement> for further details on our privacy statement.

Signature of Applicant:

Date (dd/mm/yyyy):

For Official Use

Date of Application
Received (dd/mm/yyyy):

Received By:

Date of Notification
to Applicant:

Authorisation Issued By: