

APPLICATION FORM APPROVAL OF AVIATION TRAINING ORGANISATION

☐ FTO ☐ TRTO ☐ Initial Issue ☐ Renewal	☐ Change of Pa	rticulars	
This form will take about 5 mins if you have t	he required information.		
Part I – General Information			
Name of Organisation :		Certificate of Approval No :	
		Date of Expiry :	
Address of Organisation :		Location of Training(if different from address) :	
Tel. No. :		Fax No. :	
Part II – <u>Key Personnel</u>			
Full Name of Accountable Manager :		Designation :	
Email:		Tel. No. :	
Full Name of Overall Course Co-Ordinator :		Designation :	
Email:		Tel. No. :	
Full Name of Quality Manager(if applicable):		Designation :	
Email:		Tel. No. :	
Part III – <u>Training Course</u>	-		
Description of Training Course :			
Training Approval Sought :			
☐ Ab-Initio Course		☐ Type Rating Course	
License Typefor Aircra	ift Type	License Type_	for Aircraft Type
License Typefor Aircraft Type		License Type_	for Aircraft Type
License Typefor Aircraft Type		License Type_	for Aircraft Type
Part IV – <u>Declaration</u>			
I declare that the particulars and all doc	cuments submitted in su	pport of this application	n are true and accurate in every aspect.
Date Name & Signature of Nominated Accountable Ma			ninated Accountable Manager
FOR OFFICIAL USE ONLY			
Fee Payable : \$4,500	Initial Issue No :		Period of Validity :

Receipt No:

Cheque No:

Signature & Date :