



TRINIDAD AND TOBAGO CIVIL AVIATION AUTHORITY

APPLICATION FOR GRANT OR RENEWAL OF FLIGHT TEST EXAMINER AUTHORISATION

I hereby apply for the **GRANT/RENEWAL** of **FLIGHT EXAMINER AUTHORISATION**

1. (a) Surname.....
(BLOCK CAPITALS)

(b) First name (s)
(BLOCK CAPITALS)

3. (a) Residential Address: (b) Postal Address:
.....
.....

4. (a) Type of licence (b) No. (c) Valid to

5. (a) Private Telephone No. (b) Business Telephone No.

6. Place of Birth: 7. Date of Birth:
yy/mm/dd

8. Nationality: 9. Sex: M F

10. Date Instructor Rating Granted:
yy/mm/dd

11. Date of last Instrument test.....

12. Date of last Proficiency Check.....

13. Number of Students/Pilots Instructed in past 12 months:

14. Number of Students/Pilots Examined in past 12 months:



TRINIDAD AND TOBAGO CIVIL AVIATION AUTHORITY

15. FLYING EXPERIENCE

Hours Claimed	Day				Night				Total
	PIC	PIC(us)	Co-Pilo	Dual	PIC	PIC(us)	Co-Pilo	Dual	
Total hours as Pilot
During last 6 months
During last 12 month

16. Simulator hours

17. I have met all the requirements for the Grant/Renewal of this Authorisation. YES NO

18. I am aware of my Responsibilities and Privileges as a Flight Examiner. YES NO

19. **DECLARATION** – I hereby certify that the particulars I have given in this form are true to the best of my knowledge and belief.

.....
Date of Application

.....
Signature of Applicant

FOR OFFICIAL USE ONLY

Fees Paid:	Date:	Receipt #	File #
------------	-------	-----------	--------

This application is: Approved
 Not Approved

Remarks:

.....

.....

.....

.....
Officer Reviewing Application

.....
Date