

Applicant's Specimen Signature:

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CIVIL AVIATION AUTHORITY  
PAPUA NEW GUINEA

## Application for Issue of Flight Crew Licence or Rating under CAR Part 61

Use a separate form for each licence or rating

|                      |  |                                |                 |
|----------------------|--|--------------------------------|-----------------|
| Title:               |  | PNG CAA ID number (if known)   |                 |
| Surname:             |  | Given Names (First)            |                 |
| Country of Birth:    |  | Date of Birth:                 | D      M      Y |
| Nationality:         |  |                                |                 |
| Residential Address: |  | Postal Address: (if different) |                 |
|                      |  |                                |                 |
| Private Telephone:   |  | Business / Mobile Ph           |                 |

### LICENCE APPLIED FOR – MARK APPROPRIATE BOX

|  |  |
|--|--|
| Aeroplane <input type="checkbox"/> Helicopter <input type="checkbox"/><br>Other <input type="checkbox"/>   |  |
| Private Pilot (PPL) <input type="checkbox"/> Commercial Pilot (CPL) <input type="checkbox"/> Airline Transport Pilot (ATPL) <input type="checkbox"/> |  |
| Note: Please complete the questionnaire below.   |  |

### RATING APPLIED FOR

|   |  |
|---|--|
| Flight Instructor Rating <input type="checkbox"/><br>Instructor Supervisor <input type="checkbox"/><br>Instrument Rating <input type="checkbox"/> | Examiner Rating <input type="checkbox"/><br><br><div style="text-align: right;">                     Airline <input type="checkbox"/><br/>                     General Aviation <input type="checkbox"/><br/>                     Restricted <input type="checkbox"/> </div> |
|---|--|

### THE FOLLOWING ITEMS MUST BE ENCLOSED WITH THIS APPLICATION FORM

|                                 |                          |
|---------------------------------|--------------------------|
| For Licence Issue – PPL         |                          |
| 1. Completed Flight Test Report | <input type="checkbox"/> |
| 2. Exam Credits including FRTO  | <input type="checkbox"/> |
| 3. Current Medical Certificate  | <input type="checkbox"/> |

|  |                          |
|--|--------------------------|
| For Instrument, Instructor & Examiner Rating issue |                          |
| 1. Completed Flight Test Report                    | <input type="checkbox"/> |
| 2. Flight Crew Licence                             | <input type="checkbox"/> |
| 3. Exam Credits (Instrument Rating Only)           | <input type="checkbox"/> |
| 4. Old Examiner Cert (Flight Examiners only)       | <input type="checkbox"/> |

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|---|
| For Licence Issue – CPL, ATPL                               |
| All of the above <b>plus highest licence presently held</b> |

### Declaration

I hereby certify that the enclosed copies of my personal documents are authentic and that the information shown on them is true and correct. I further authorise such information to be disclosed by the CAA to Civil Aviation Authorities in other ICAO contracting states, who require such information to carry out their function as lawfully directed by the CAA.

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OFFICE USE ONLY

| Client No. | Date of Issue | Fees | Receipt No. | Receipt Date | Remarks |
|------------|---------------|------|-------------|--------------|---------|
|            |               |      |             |              |         |

Fit and Proper Person      Yes/No      Signature \_\_\_\_\_ Date .....

|          |  |                              |  |
|----------|--|------------------------------|--|
| Title:   |  | PNG CAA ID number (if known) |  |
| Surname: |  | Given Names (First)          |  |

**Questionnaire**

|   |                          |                          |
|---|--------------------------|--------------------------|
| INFORMATION SOLICITED HEREIN IS REQUIRED PURSUANT TO SECTIONS 49 AND 50 OF THE CIVIL AVIATION ACT 2000, WHICH PROVIDE FOR A FIT AND PROPER PERSON TEST TO BE SATISFIED  |                          |                          |
|   | <b>Yes*</b>              | <b>No</b>                |
| (a) Have you previously had an application for an aviation document rejected or have you been the holder of an aviation document which has been suspended or revoked (other than a licence that has been superseded by a replacement or a higher licence)?                                  | <input type="checkbox"/> | <input type="checkbox"/> |
| * If answering "Yes", please give details.  |                          |                          |
|   |                          |                          |
|   |                          |                          |
|   |                          |                          |
|   |                          |                          |
| (b) Have you been convicted in any court of law of any aviation safety offence in the last five years or are you presently facing charges for an aviation safety offence?   | <input type="checkbox"/> | <input type="checkbox"/> |
| (c) Have you been convicted on any criminal charge or are you presently facing charges for any criminal offence?  | <input type="checkbox"/> | <input type="checkbox"/> |
| (d) Have you any history of physical or mental health or serious behavioural problems?  | <input type="checkbox"/> | <input type="checkbox"/> |
| *If answering "Yes" to question b, c, or d above, please provide details on separate sheets enclosed in a sealed envelope marked "Confidential, Assistant Director Personnel Licensing, Civil Aviation Authority". Include name, PNG CAA ID number (if known), and certificate applied for. |                          |                          |

**Declaration**

I hereby certify that to the best of my knowledge and belief the statements made and the information supplied in this questionnaire and the attachments are correct. I consent to the disclosure by the Papua New Guinea Police of any details of any convictions I may have, pursuant to this application, to the Assistant Director, Personnel Licensing, Civil Aviation Authority of PNG.

Applicants Signature:.....Date:.....

*The provision of false information or failure to disclose information relevant to the grant or holding of an aviation document constitutes an offence under Section 283 of the Civil Aviation Act 2000 and is subject, in the case of an individual, to imprisonment for a term not exceeding 12 months or to a fine not exceeding K25,000, or both.*

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| <p><i>Post or deliver this form to:</i></p> <p style="text-align: center;"><b>Civil Aviation Authority of Papua New Guinea<br/>(Flight Crew Licensing)<br/>P O Box 684<br/>BOROKO N C D<br/>Papua New Guinea</b></p> |
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