

## PAKISTAN CIVIL AVIATION AUTHORITY PERSONNEL LICENSING OFFICE

## APPLICATION FOR ISSUE OF AIRCREW LICENCES & RATINGS

| CA | AF. | -01 | 3-R | GL | C-1 | .0 |
|----|-----|-----|-----|----|-----|----|
|    |     |     |     |    |     |    |

| Application for   | _       |                       |          |             |                       |                       |   |        |                      |                   |                          |                     |  | Ref:                         |                        |        |  | -   |  |
|---|---------|-----------------------|----------|-------------|-----------------------|-----------------------|---|--------|----------------------|-------------------|--------------------------|---------------------|--|------------------------------|------------------------|--------|--|-----|--|
| Name (Block Letters)  |         |                       |          |             |                       |                       |   |        | Father's Name        |                   |                          |                     |  |                              |                        |        |  |     |  |
| Permanent Address   |         |                       |          |             |                       |                       |   |        |                      |                   |                          |                     |  |                              |                        |        |  |     |  |
| Educational Qualifications  |         |                       |          |             |                       |                       | Email   |        |                      |                   |                          |                     |  | Telephone No.                |                        |        |  |     |  |
| To be filled only for in  |         |                       |          |             |                       |                       |   |        |                      |                   |                          |                     |  |                              |                        |        |  |     |  |
| ☐ Male Date of Birth Place of E   |         |                       |          |             |                       | of Bir                | Birth Nationality Nati                                |        |                      |                   |                          |                     |  | onal ID Card No./Passport No |                        |        |  |     |  |
| ☐ Female  |         |                       |          |             |                       |                       |   |        |                      |                   |                          |                     |  |                              |                        |        |  |     |  |
| Other Licences issued by CAA Pakistan Employe   |         |                       |          |             |                       | yer                   | er Employed as pilot Involvement in accident/ incider |        |                      |                   |                          |                     |  |                              | dent                   |        |  |     |  |
| Type & No Validity  |         |                       |          |             |                       |                       |   |        | ☐ Y                  |                   | ⊒ No                     | <u> </u>            |  | tach details)                |                        | No     |  |     |  |
| Military Rar  |         | _                     |          |             | Tota                  | al Fly                | Flying Hours Aircraft Flown                           |        |                      |                   |                          |                     | ☐ Serving NOC                            |                              |                        |        |  |     |  |
| Experience Ser  | vice N  |                       | suing S  | toto:       |                       |                       | 2.<br>Licence Type & No:                              |        |                      |                   |                          | Valid               | Validity: Retired Yes Validity: Ratings: |                              |                        |        |  | No  |  |
| Foreign Licence   | details | 153                   | suring 5 | iaie.       |                       |                       | LICETIC   | е тур  | Can                  | iU.               |                          | valid               | Jity.                                    |                              | IXC                    | ungs.  |  |     |  |
| CAA Technical examinations   Paper 1   Da   |         |                       |          |             | Date                  | e Paper 2             |   |        |                      | Date              |                          |                     | per 3                                    | <br> <br> <br> <br>          | Date                   |        |  |     |  |
| Name of Flying School From  |         |                       |          | rom         |                       | To Hour               |   |        | Flowr                | Flown Licence /   |                          |                     | ng Aircraft flown                        |                              |                        | wn     |  |     |  |
|   |         |                       |          |             |                       |                       |   |        |                      |                   |                          |                     |  |                              |                        |        |  |     |  |
|   |         |                       |          |             |                       |                       |   |        |                      |                   |                          |                     |  |                              |                        |        |  |     |  |
|   |         |                       |          |             |                       |                       |   |        |                      |                   | Cross (                  | ss Country          |  |                              | Instrument             |        |  |     |  |
| Flying Experience   | Day     |                       | Nigh     |             | ight                  | ht                    |   | Total  |                      | Day N             |                          | Night Sim           |  | nulated                      |                        |        |  |     |  |
| P-1   | P-2     | P-3                   | Total    | P-1         | P-2                   | P-3                   | Total   |        |                      |                   | P-1                      | P-3                 | P-1                                      | P-3                          | P-1                    | P-3    |  |     |  |
| Aeroplane   |         |                       |          |             |                       |                       |   |        |                      | $\Rightarrow$     |                          |                     |  |                              |                        |        |  |     |  |
| Helicopter  |         |                       |          |             |                       |                       |   |        |                      | $\Rightarrow$     |                          |                     |  |                              |                        |        |  |     |  |
| Glider  |         |                       |          | ***         |                       |                       |   | 8      |                      | $\Rightarrow$     | No. of air tow Launches: |                     |  |                              | No. of power Launches: |        |  |     |  |
| Free Balloon  |         |                       |          |             |                       |                       |   |        | No.                  |                   |                          | o. of free flights: |  |                              |                        |        |  |     |  |
| Recent experience   | P-1 ([  | P-1 (Day) P-1 (Night) |          | ght) I      | No. of Take off (Day) |                       |   |        | No. of Landing (Day) |                   |                          | /)                  | Date last flown Aircraft flow            |                              |                        |        |  | own |  |
| (Last Six Months)   |         |                       |          | No. of Take |                       |                       | off (Night) No. o                                     |        | of Landir            | f Landing (Night) |                          |                     |  |                              |                        |        |  |     |  |
| Simulator Hours Instructional Hours   |         |                       |          |             | Fli                   | Flight Engineer Hours |   |        |                      | Grand Total       |                          |                     |  |                              |                        |        |  |     |  |
| Applicant's Cert  |         |                       | de bv me | e on thi    | s applica             | ation a               | re true to  | the be | st of m              | v knowle          | edae ar                  | nd belief           |  |                              |                        |        |  |     |  |
| I certify that the statements made by me on this application are true to the best of my knowledge and belief  Date                |         |                       |          |             |                       |                       |   |        |                      |                   |                          |                     |  |                              |                        |        |  |     |  |
| Signature of Applicant  Certification (by Chief Flying Instructor / Chief Pilot)  |         |                       |          |             |                       |                       |   |        |                      |                   |                          |                     |  |                              |                        |        |  |     |  |
| Certified that I have examined the log book (s)of Mr./Mrs./Miss and to the best of my knowledge the above information is correct. |         |                       |          |             |                       |                       |   |        |                      |                   |                          |                     |  |                              |                        |        |  |     |  |
| Date  |         |                       |          |             |                       |                       |   |        |                      |                   |                          |                     |  |                              |                        |        |  |     |  |
| _   |         |                       |          |             |                       |                       |   |        |                      |                   |                          |                     | -  |                              |                        | & Stan |  | _   |  |