

 پاکستان سول ایوی ایشن اتھارٹی	PAKISTAN CIVIL AVIATION AUTHORITY PERSONNEL LICENSING OFFICE MEDICAL CERTIFICATE (Aircrew other than Pilots)	CAAF-155-LCXX-2.0
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Licence / Certificate No.

Ref:

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1. Name (Block Letters)		Father's Name					
Address					Email		
					Telephone No		
To be filled only for initial issue:							
Male	Date of Birth	CNIC NO.	Height	Weight	Hair	Eyes	
Female							
Applicant has met Class – II Medical Standards as in ICAO Annex – 1.							
LIMITATIONS							
Date of Examination :				Valid until :			
Authorised Signature							
Dated:							
Signature of Holder							

NEXT DUE	Next Medical Due	
	E.C.G	
	X – RAY Chest	
	Audiometry	

Copy to :-

Personnel Licensing Office - CAA
 Chief of Aviation Medicine - CAA
 Individual Concerned
 Manager Flight Services – Concerned Airline