

Application for the Re-issue of a Senior Examiner Certificate

Please complete this form in **BLOCK CAPITALS** using black or dark blue ink after reading the attached guidance.

When this form is completed, please forward it together with the appropriate fee and copies of applicant's current and valid rating certificates.



Unique No. (to be completed by CAA)

FALSE REPRESENTATION STATEMENT

It is an offence under Article 256 of the Air Navigation Order 2016 to make, with intent to deceive, any false representation for the purpose of procuring the grant, issue, renewal or variation of any certificate, licence, approval, permission or other document. This offence is punishable on summary conviction by a fine up to £5000, and on conviction on indictment with an unlimited fine or up to two years imprisonment or both.

1. APPLICANT DETAILS

To be completed by the Applicant

CAA Personal reference number:

Title: Forename(s): Surname:

Date of birth (dd/mm/yyyy): Nationality:

Town of birth: Country of birth:

Permanent Address:

.....

..... Postcode:

Telephone Number: Alternative Telephone Number:

E-mail: Fax Number:

2. APPLICATION DETAILS

To be completed by the Applicant

I wish to revalidate ☐ renew ☐ my Senior Examiner privileges.

on the following aircraft/simulator types:

3. CONFIRMATION OF COMPLIANCE

To be completed by the Applicant

I confirm I completed the observed assessment of competence on:

Date: (dd/mm/yyyy) Aircraft/Simulator Type:

I have attended a Senior Examiner refresher seminar provided by the competent authority:

Date of Seminar: Seminar Provider:

I hold valid examiner and instructor privileges for all the above mentioned aircraft: Yes ☐

I have completed the required minimum of two assessments of competence as a Senior Examiner in each year of validity: Yes ☐ No ☐

4. DECLARATION OF APPLICANT**To be completed by the Applicant****DETAILS TO BE PUBLISHED**

I understand that the UK CAA will publish details in accordance with Part ARA.FCL.205.

Please note your personal address details will not be published.

I hereby confirm my compliance with Part-FCL reference FCL.1010 & FCL.1030 and declare that the information provided on this form is correct.

Signature: Date:

PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1**5. GUIDANCE NOTES**

1. This completed form must be forwarded without delay to:

Fax: 01293 573959 - Email: flightcrewstandards@caa.co.uk
or posted to Licensing & Training Standards (Flight Crew Standards Support),
Civil Aviation Authority,
Safety Regulation Group,
Aviation House, Gatwick Airport (South),
West Sussex, RH6 0YR

2. Please note failure to submit all of the required documentation will lead to a delay in processing your application.