

Application for the Validation (or extension of Validation) of a Flight Crew Licence Issued by an ICAO Contracting State for Non Commercial Activities where the pilot is not being remunerated under Annex III Regulation (EU) 1178/2011 (the EASA Aircrew Regulation)



Please complete this form online (preferred method) then print, sign and submit as instructed. Alternatively, print, then complete in BLOCK CAPITALS using black or dark blue ink

Please read the attached Guidance Notes before completing this form.

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. PERSONAL DETAILS

CAA Reference No:

Title Forename(s) Surname
Date of Birth (dd/mm/yyyy) Nationality
Town of Birth Country of Birth
Permanent Address
..... Post Code
Telephone Number Mobile Telephone Number
Email Fax Number

2. ADDRESS FOR CORRESPONDENCE (if different from above)

Postal Address (if different from above):
..... Postcode:

3. MEDICAL FITNESS

State of issue:
Class of Medical Certificate Held:
Date of last Medical:
CAA use only:

4. VALIDATION REQUIREMENTS

Capacity in which flight crew member will be flying:	P1 (Pilot In Command)	P2 (Co-Pilot)
Activity for which validation is required:		
Description of the activity for which the validation is required:		
For Ferry Flight without remuneration please tick:		
Privileges applied for:		
AEROPLANES	HELICOPTERS	
Non-commercial activities with an instrument rating	Non-commercial activities with an instrument rating	
Non-commercial activities without an instrument rating	Non-commercial activities without an instrument rating	
Start date for validation:	Type(s) of aircraft:	
End date for validation (if less than 12 months):		

5. PARTICULARS OF NON-EU LICENCE				
Licence to be validated	Country of issue:			
	Type of Licence:			
	Licence number:			
	Date of issue: Date of expiry:			
	Date of last medical examination:			
	Class of Medical certificate held and any limitations on the medical:			
	Limitations or endorsements:			
Radio telephony Operator's Licence		Licence number:		
Instrument rating		Date of Issue: Date of last check:		
Class or Type rating for which the validation is to be issued		Name of rating: Date of last check:		
NON-Commercial Activities	Total Pilot Experience		Aeroplanes	Helicopters
	Total Flying Experience	PIC:		
		PIC in the preceding 24 months:		
		Instrument time as PIC:		
		Instrument flying time as PIC in the preceding 12 months:		

6. If you do not hold a valid English Language Proficiency Assessment on your third country licence and wish to use the radio you will be required to undertake an English Language Proficiency assessment at a Language school approved by the UK CAA					
ICAO English Language Proficiency	Date	Level	Pass	Examiner's Name & Signature	Examiner's CAA reference number
The above examination was completed at:					

7. SKILL TESTS	TO BE COMPLETED BY AN EXAMINER
A. Details of skill test conducted by a Part FCL examiner for non-commercial activities without instrument rating for class or type rating (to be completed by an examiner holding the appropriate valid examiner certificate under EASA Aircrew Regulation)	
I confirm that I have assessed the applicants knowledge of Air Law and Human Performance and confirm this is:	
Adequate: That they have successfully passed a PPL skills test	Inadequate: (please attach the PPL skill test report form)
Non-UK Examiners – I have reviewed and applied the relevant national procedures and requirements of the UK CAA contained in version of the Examiner Differences Document:	
Examiner's Name:	Examiner's No:
Examiner's Signature:	Date:
Authorising Competent Authority:	
Applicants Signature:	Date: