



Civil Aviation Authority of Fiji
Application for a Restricted Aviation Training Certificate

Form
PL 112F

1. ORGANISATION DETAILS

Legal name of organisation <i>(The certificate will be issued in this name)</i>	
Trading name (if applicable)	
Business Address	
Postal Address	
Telephone	
Fax	
E-mail	

2. QUESTIONNAIRE

(The following questions must be answered)

YES NO

Has the applicant been convicted for any public transport safety offence in the last five years or is the applicant presently facing charges for a public transport safety offence?

Has the applicant previously had an application for an aviation document rejected or has an Aviation document held by the organisation been suspended or revoked?

**If answering “Yes”, please provide details on separate sheets enclosed in a sealed envelope marked “CONFIDENTIAL”, addressed to “The Chief Executive - Civil Aviation Authority of Fiji”. Include organisation name and the type of certificate applied for.*

3. INSTRUCTOR/TRAINER

A Curriculum Vitae which outlines qualifications and experiences must be submitted along with this application personnel employed or contracted to plan, conduct, and supervise the training course listed in Section 4.

NAME OF PERSONNEL	TITLE	PHONE CONTACT	E-MAIL



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4. SUMMARY OF TRAINING COURSES AND / OR TRAINING ASSESSMENTS

Specify below the Training courses and / or training assessments that is being applied for.

TRAINING COURSES	REMARKS

TRAINING ASSESSMENTS	REMARKS

5. FACILITIES AND RESOURCES

Provide comprehensive details of offices, classrooms, briefing rooms, practical training facilities, workshops, and any other accommodations available for use by training or assessing personnel. Include information on the capacity, equipment, and any relevant features that contribute to the effectiveness of the training environment.



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6. Proposed Commencement Date and Duration of Training/Course

Specify the intended start date and duration for the training/course. Clearly outline the proposed timeline, including commencement and completion dates, to facilitate efficient scheduling and planning.

7. Submission of Administration, Organizational and Training Manuals

Has the administration, organisational and training manuals been submitted for assessment to the Civil Aviation Authority of Fiji. *(If "Yes" state the date of submission)*

(If "No" please enclose with this application)

I hereby apply for Restricted Aviation Training Certificate based on the information provided in this form and the attached relevant supporting documents.

DECLARATION

I solemnly declare that all information provided by me in this application form is true, accurate, and complete to the best of my knowledge. I acknowledge that any further details necessary for the processing of this application will be promptly furnished upon request

Signature:

Name (BLOCK LETTERS):

Position:

Date: