



IMPORTANT

Before completing this form, its contents should be read carefully. Completed applications should be sent to the Civil Aviation Authority of Fiji, Private Mail Bag (NAP 0354), Nadi Airport, Fiji, together with the documents required under Section 2. Your attention is drawn to the provisions of the Air Navigation Regulations in respect of Regulation 128 *Forgery, etc., of documents*, of the Air Navigation Regulations.

SECTION 1 PERSONAL PARTICULARS OF APPLICANT (in BLOCK CAPITALS please)

Full Name (Surname first)

Address for Service

Postal Address (If different from above)

Contact Details (Telephone, Fax and Email)

SECTION 2 APPLICATION

I hereby apply for authorization to be an IFP Independent Reviewer approved by the Civil Aviation Authority of Fiji.

Evidence of the following is also attached in support of this application:

- Curriculum Vitae (CV) attached in support of this application.

Training and Education

1. Please tick all PANS-OPS and other flight procedure design-related courses that you have completed.

- ICAO PAN-OPS Instrument Flight Procedures: General Criteria and Conventional Practices

Year completed: _____

- ICAO PAN-OPS Instrument Flight Procedures: Criteria for RNAV, GNSS and RNP

Year completed: _____

- RNP-AR Training

Year completed: _____

- Navigation database coding (e.g., ARINC-424)

Year completed: _____

- Advanced RNP Training Course

Year completed: _____

GBAS Training

Year completed: _____

SBAS Training

Year completed: _____

Other (indicate year complete)

Procedure Design Experience and Current Authorizations

2. Please describe your previous procedure design experience, for example: designed procedure for a certain company in the past number of years, peer reviewed flight procedures, developed concept procedures for a certain airport, etc.

Skills and Competency

1. Please tick all the instrument flight procedure types you have designed in the last 2 years.

Non-precision Approach (Ground-based)

Non-precision Approach (RNP APCH)

Non-precision Approach (SBAS)

Precision Approach (Ground-based, i.e., ILS)

Precision Approach (SBAS)

RNP-AR Procedures (RNP-AR)

Approach with Vertical Guidance (APV/Baro-VNAV)

Departure (Ground-based)

Departure (PBN)

En route (Ground-based)

En route (PBN)

Any other details

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2. Do you currently hold any Full Authority to design any IFP types?

No

Yes, the IFP types are

3. Have you held any Full Authority to design any IFP types?

No

Yes, the IFP types are

4. Have you held any Full Authority to peer review any IFP types?

No

Yes, the IFP types are

5. Tools, Software and Software Related Knowledge

What design software are you familiar with

Are you familiar with the use of PHX software



6. Are you familiar with use of Microsoft Excel for collation and preparation of data (e.g., obstacle data)?

7. Have you used GIS software? No Yes, if yes what GIS software have you used:

8. Have you used any software to obtain, download or manipulate terrain data such as SRTM, or ASTER DEM? Yes No

Yes, the software I used is: _____

9. Are you familiar with the different projection datums used in Fiji (e.g., UTM Zones, etc.)?

No Yes

10. Are you familiar with Fiji local datum?

No Yes

4. References

1. Professional references from previous employers, clients, or colleagues in the aviation industry

- _____
- _____
- _____
- _____

Section 3 Declaration

The provision of false information or failure to disclose information relevant to the grant or holding of an aviation document constitutes an offence of Air Navigation Regulations No. 128.

I,hereby declare that the information provided in this application is true and accurate to the best of my knowledge.

I understand that any false or misleading information may result in the rejection of my application or revocation of any approval granted; and

I agree to submit to CAAF any other information required to support this application



Application for the IFP Independent Reviewer

Form
GS752

1.Application Fee (Refer to Civil Aviation (Fees and Charges) Regulation)

I agree to pay any applicable fees as set out by CAAF for Instrument Flight Procedures.

2.Photograph

Applicant are required to submit Passport size colour photographs (Signed and dated)

3.Proof of Identification

Applicant are required to submit Passport, Voter ID NRC or Birth Certificate together with a Photo ID as proof of identification.

4.Police Clearance

Applicant are required to submit Police Clearance (from all countries resided in for more than 6 consecutive months within the past 10 years)

SECTION 4 FIT AND PROPER PERSON

THE INFORMATION SOLICITED HEREUNDER IS REQUIRED PURSUANT TO ANR REGULATION 56 (3) OF THE AIR NAVIGATION REGULATIONS 1981.

a) Have you previously had an application for an Aviation Document rejected or have you been the holder of an aviation document which has been suspended or revoked?

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b) Have you been convicted on any criminal charge or are you presently facing charges for a transport safety offence?

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c) Have you been convicted on any criminal charge or are you presently facing charges for a criminal offence?

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d) Have you any history of physical or mental health or serious behavioural problems?

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e) Have you been found guilty of malpractice of any kind?

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f) Have you been the subject of/or dealt with in disciplinary or similar proceedings relating to medical practice?

g) Are you currently being investigated for any disciplinary or similar matters by any medical registration authority?

If answering "YES" to questions c) to g) above, please provide details on separate sheets enclosed in a sealed envelope marked "**Confidential, Chief Executive, Civil Aviation Authority of Fiji, include name, client No (if known), organisation name**", and attach to this application.

Note: The provision of false information or failure to disclose information relevant to the grant or holding of an aviation document constitutes an offence under Section 17(5)(b) of the Civil Aviation Authority Act 1979 and Regulation 128 of the Air Navigation Regulations 1981 and the applicant is subject to prosecution as well as the revocation, suspension or cancellation of their aviation document or in the event of initial issue, the rejection of the application.

I hereby certify that to the best of my knowledge and belief the statements made, and the information supplied on this form is true and correct, and that the enclosed copies of my personal documents are authentic and that information shown on them is true and correct.

I hereby authorise the Civil Aviation Authority of Fiji to use the information concerning me on this form or attached hereto for any purpose as required or authorised by Law and I authorise such information to be disclosed by the CAAF to any person who requires such information to carry out any function as lawfully directed by the CAAF. I consent to the disclosure by any court of law of any details of any convictions I may have pursuant to this application and by any medical administration authority, to the Chief Executive, Civil Aviation Authority of Fiji.

Signature of Applicant

Date: