# Complete application form and -

1. **ATCL/ATCTP & FISOL/FISTP**: Valid Class 3/4 (as appropriate) Medical Assessment issued by an AMA.

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| Attach photograph here Approx 2cmx2.5cm  |

1. **Initial issue of licence/rating** – Evidence that required training has been satisfactorily completed as per the

SD PEL, certified Rating Board Examination Results and a passport-size photograph.

 **Renewal of ATCL, FISOL & ASOL** – Provide results of licence renewal examination.

Application documentation & appropriate fees shall be submitted at least 10 working days in advance to allow time for processing. For fees & charges, please refer to the current Civil Aviation Fees & Charges Regulation, accessible via the Authority’s website.

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| **TO BE COMPLETED BY APPLICANT**  | *Tick**applicable box below* [ ] *\* Delete as applicable* | *Provide a copy of birth certificate/passport biodata page for initial issue.* |
| **First Name**  | **Middle Name**  | **Surname**  |
|       |       |       |
| **Address**:      **Nationality:**      **Country of Birth:**      **Date of Birth**: Click or tap to enter a date. | **Phone No:**      **(**Res)      **(**Wk) | **Licence Renewal**Date of Examination:Click or tap to enter a date. |
| **Employer’s Name:**       |
| **Class 3/4 Medical Assessment –** Provide date of visit if recently seen by an AMA:       |
| **LICENCE/RATING APPLIED FOR: -**       |
| **[ ]** Air Traffic Controller Licence (ATCL)  | [ ]  Aerodrome Control Rating: Nadi/Nausori \* [ ]  Approach Control Procedural Rating: Nadi/Nausori\* [ ] Approach Control Surveillance Rating: Nadi/Nausori\* [ ]  Area Control Procedural Rating – Nadi [ ]  Area Control Surveillance Rating - Nadi |
| **[ ]** Aeronautical Station Operator Licence (ASOL)  | [ ]  HF RTF and Air Ground operations [ ]  VHF/HF RTF Operations [ ]  VHF RTF operations (Airside Operations) |
| **[ ]** Flight Information Service Officer Licence (FISOL) | [ ]  International Flight Information service rating (Nadi FIR) [ ]  Aerodrome Flight Information service rating (Domestic Aerodromes) [ ]  Domestic Flight Information service rating (Fiji Domestic Airspace) |
| **[ ]** ATC Training Permit  |  [ ]  FIS Training Permit  |
| **[ ]** New/Replacement\* Licence/Permit \* | [ ] If renewal, state Licence/Permit No:      |
| State any other aeronautical related qualifications and provide evidence if new additions: - [ ]  ATS Instructor rating (OJTI) [ ] ATS Instructor rating (classroom) [ ] ATS Examiner rating [ ]  Others (specify):       |

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| The information solicited herein is required pursuant to Air Navigation Regulations 53, which provide for a fit and proper person test to be satisfied.  |
| (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 *(other than a licence that has been superseded by a replacement or higher licence)*? If “yes”, please give details: -  | **[ ]** Yes [ ] No  |
| (b) Have you been subjected to a “stand-down” from solo operational duties by your employer? If “Yes”, please give details: -  | **[ ]  Yes** **[ ]  No**  |
| (c) Have you been convicted in any court of law of any transport safety offence in the last five years or are you presently facing charges for a transport safety offence such as driving under the influence of alcohol or drugs (including Kava)?  | **[ ]** Yes# [ ] No |
| (d) Have you been convicted in any court on any criminal charge or are you presently facing charges for any criminal offence?  | **[ ]** Yes#  [ ] No |
| (e) Have you any history of physical or mental health or serious behavioural problems?  | **[ ]** Yes# [ ] No |
| # If answering “Yes” to question c), d) or e) above, please provide details on separate sheets enclosed in a sealed envelope marked “Confidential - Senior Personnel Licensing Inspector, Civil Aviation Authority of Fiji” and attach the envelope with this application form.  |
| **Declaration** I certify that the above information is correct and that the enclosed copies of my personal documents are authentic and the information provided is true and correct. I further authorise the Authority to use the information concerning me on this form or attached hereto for any purpose as required or authorised by law. I further authorise such information to be disclosed by the Authority to any person who requires such information to carry out his/her duties, as lawfully directed by the Authority I consent to * the disclosure by the Fiji Police of any details of any convictions I may have, pursuant to application, to the Senior Personnel Licensing Inspector, Civil Aviation Authority of Fiji; and
* where applicable, the copying of my signature below required for the issuance of an ATC/FIS training permit.

Applicant’s Signature:  Date: Click or tap to enter a date. |
| Post or deliver the completed form and required documents to: Senior Personnel Licensing Inspector  Civil Aviation Authority of Fiji  Private Mail Bag (NAP 0354)  Nadi Airport **FIJI**  |

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| **Travelling Time** | **Transportation** | **Accommodation** | **Rating / Validation** | **Processing** | **Time** |
|       |       |       |       | ANSI |       |
|       |       |       |       | LO |       |
| Examination Results | Medical Results | Fit & Proper | Licence No: | MPEL |       |
| [ ]  Passed / [ ]  Failed\* | [ ]  Y/[ ] N/[ ]  Conditional\* | Y[ ] /N[ ] / [ ] Conditional\* |       |       |       |

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| Remarks:       Checked/Accepted by Licensing Officer:       Signature  Date: Click or tap to enter a date. |
| Comments:       Endorsed by ANSI:       Signature:  Date: Click or tap to enter a date. |
| Comments:        Approved by SPELI:       Signature:  Date: Click or tap to enter a date. |
| **Fees**  |
| Receipt No./Date |      Click or tap to enter a date. |