



Flight Operations Standards Department
General Aviation & Training Section
FTOs/TRTOs Safety Management System Manager Approval Application Form

A. FOR APPLICANT USE ONLY

1	Operator Name		
2	Nominated SMS Manager Name		
3	*Qualifications Relevant to SMS Post		
4	*Work Experience Relevant to SMS/QMS Post		
5	Nominated SMS Manager. I hereby declare that the information given in this form is true, correct & completed.		
	Name	Signature	Date
6	Accountable Manager. I hereby declare that the applicant is nominated for SMS Manager Post		
	Name	Signature	Date

B. FOR CARC USE ONLY

		YES	NO
1	Requirements. ICAO Doc. 9859		
a	Full time experience in aviation safety in the capacity of an aviation safety investigator, safety/quality manager or safety risk manager		
b	Sound knowledge of the organization's operations, procedures and activities		
c	Broad aviation technical knowledge		
d	An extensive knowledge of safety management systems (SMS) and have completed appropriate SMS training		
e	An understanding of risk management principles and techniques to support the SMS		
f	Experience implementing and/or managing an SMS		
g	Experience and qualifications in aviation accident/incident investigation and human factors		
h	Experience and qualifications in conducting safety/quality audits and inspections		
i	Sound knowledge of aviation regulatory frameworks, including ICAO Standards and Recommended Practices (SARPS) and relevant civil aviation regulations		
j	The ability to communicate at all levels both inside and outside the company		
k	The ability to be firm in conviction, promote a "just and fair culture" and yet advance an open and non punitive atmosphere for reporting		
l	The ability and confidence to communicate directly to the accountable executive as his advisor and confidante		
m	Well-developed communication skills and demonstrated interpersonal skills of a high order, with the ability to liaise with a variety of individuals and organizational representatives, including those from differing cultural backgrounds		
n	Computer literacy and superior analytical skills		
2	Nominated SMS Manager	<input type="checkbox"/> Approved	<input type="checkbox"/> Rejected
	• Remarks (if rejected only).		
	Approving Flight Crew Licensing Inspector Name	Signature	Date

*Attach copy of relevant certificate

