



Flight Operations Standards Department
Flight Crew Licensing & Training Section - Ratings
Type Rating Instructor (TRI(H)) Issuance Application Form

Airplane or Flight Simulator - All instructor ratings and authorizations are valid for period of 3 years

A. FOR APPLICANT USE ONLY

1. Personal Details.

• Applicant name			
• Address			
• Mobile number			
• Date & place of birth		• Nationality	
• I hereby declare that the information given in this form is true, correct & completed.			• Applicant's signature

2. Application Details.

• I am applying for type rating instructor rating issuance on () Date:

3. JCAR ATPL Held Details.

• License number		• License expiry Date	
• Airplane type rating		• Type rating expiry date	

4. JCAR Medical Certificate Held Details.

Class	Expiry date	AME name	Limitations

5. Type Rating Instructor rating (MPA) Issuance Requirements.

(a) Pre-Requisite for All Instructors. (unless specified otherwise)

No	JCAR FCL Requirements
1	Applicant shall meet JCAR FCL2.310 Instructor Ratings and Authorisations – General requirements
2	Instructor name and signature:

(b) Recapitulation of conditions and flying experience for(TRIs)

No	JCAR FCL Requirements	Valid until	
1	Licence PPL(H) or CPL(H) or ATPL(H)	Valid until	
2	IR (H) multi pilot helicopter (if applicable)	Valid until	
3	JCAR Medical class I with IR	Valid until	
4	flight experience (MNM 1000 HR as pilot of helicopters)	Hours	
5	flight experience as pilot of multi-pilot helicopters (MNM 350 HR)	Hours	
6	Successfully completed the relevant technical training content of an approved TRI course at an approved FTO or TRTO	Date	
		Place	
7	Conduct on a complete type rating course at least 2 HR flight instruction as TRI on the applicable type under supervision and satisfaction of a TRI notified by the Authority	Date	
		Place	

(C) Instructor

Instructor name:

License number:signature of flight instructor:.....





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(d) FTO/TRTO/Manufacturer

Name:-----	Registration Number:-----
Name of chief flight instructor: -----	License Number:-----
Location & date:-----	Signature Of Chief Flight Instructor:-----

(e) CARC internal use only:

TRI(H) validity date: -----	type: -----	date:-----
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(f) SUPPORTING DOCUMENTS.

1. Cover letter from the TRTO for type rating instructor rating issuance.
2. This application form
3. Copy of valid JCAR ATPL
4. Copy of FCL attachment - valid type rating
5. Copy of valid JCAR medical class 1 certificate
6. Certified copy of related log book pages
7. Copy of CRM concepts and the assessment of CRM skills training record and certificate
8. Copy of type rating theoretical knowledge training instruction (teaching & learning course) training record; or copy of one of the following instructor ratings FI (A), CRI (A), IRI (A), STI (A), MCCI (A),FI (H), TRI (H), IRI (H), SFI (H)
9. Copy of type rating instructor flight instruction training record
10. Type rating instructor rating skill test report

