



**Flight Operations Standards Directorate**  
**Commercial Air Transport Section - Aviation Training Organization - Training Approval**  
**Prospective Operator's Pre-Assessment Statement Application Form**

**Section A - For Applicant Use Only**

**1. Organization Details.**

<b>a</b>	<b>Company Details</b>
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(1)	Registered name	
(2)	Trading name if different	
(3)	Mailing address	
(4)	Telephone	
(5)	Fax	
(6)	E-mail	

<b>b</b>	<b>Principal Place of Business</b>
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(1)	Mailing address	
(2)	Telephone	
(3)	Fax	
(4)	E-mail	

<b>c</b>	<b>Proposed Training Subject</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;"></td> <td style="width: 95%;">Initial Safety Training</td> </tr> <tr> <td></td> <td>Dangerous Goods Training</td> </tr> <tr> <td></td> <td>CRM Training</td> </tr> </table>		Initial Safety Training		Dangerous Goods Training		CRM Training
	Initial Safety Training							
	Dangerous Goods Training							
	CRM Training							

<b>d</b>	<b>Proposed Start Date</b>	
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<b>e</b>	<b>Proposed Training Details</b>	<b>Initial Training Approval</b>	<b>Additional Training Approval</b>
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<b>f</b>	<b>For Additional Training Approval Only List JCARs Approved Training</b>
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<b>Subjects</b>	
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

<b>g</b>	<b>Aviation Training Organization Focal Point</b>
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Name	Phone No.	E-Mail

**2. Management Details.**

No	Title	Name	Phone No.	E-mail
a	Head of training			
b	Quality manager			
c	Initial safety training manager			
d	Dangerous goods training manager			
e	CRM training manager			



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**3. Applicant's Signature for the Information Contained in This Form.** I am apply for training approval in accordance with JCAR OPS 1.

a	Initial Safety Training Approval
b	Dangerous Goods Training Approval
c	CRM Training Approval

Name	Phone No.	E-Mail



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**SECTION B - For CARC Use Only**

**1. Training Approval Assessment Arrangements.**

a	Date received by flight operations standards directorate	
b	Preliminary assessment set date	

**2. Training Approval Assessment Team**

a	Flight operations standards directorate focal point name	
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**3. Training Approval Assessment Events**

No	Assessment Events	SAT	UNSAT
a	Check the proposed company details is in accordance with JCAR Part 201 - If applicable		
b	Check the proposed principal place of business details is in accordance with JCAR OPS 1		
c	Check the proposed management details are in accordance with JCAR OPS 1		
d	Check the proposed type of training approval details are in accordance with JCAR OPS 1		

**4. Training Approval Unsatisfactory Results Details - If applicable.**

a	
b	
c	
d	

**5. Training Approval Assessment Team Recommendation.**

a	Satisfactory prospective operator's pre-assessment statement - Applicant is eligible to start the training approval
b	Unsatisfactory prospective operator's pre-assessment statement - Applicant request is rejected

**6. Assessment Team Signatory**

Name	Signature	Date