



**Flight Operations Standards Directorate**  
**Commercial Air Transport Section - Aviation Training Organization - Management Approval**  
**Initial Safety Training Manager Approval Application Form**

**A. FOR APPLICANT USE ONLY**

**1. Aviation Training Organization Details.**

• Operator name			
• Address			
• Approved training subjects			
• Accountable manager contact details	Name	Phone No.	E-Mail

**2. Nominated Initial Safety Training Manager Details.**

• Applicant name	
• Attestation issuance date	
• Cabin safety instructor authorization issuance date	

**3. Initial Safety Training Manager Approval Requirements.**

No.	JCAR OPS 1 Requirements	YES	NO
a	Practical experience and expertise in the application of aviation safety standards and safe operating practices		
b	Five years relevant work experience of which at least two years should be from the aeronautical industry in an appropriate position		
c	Appropriate management experience in a comparable organization		
d	Hold JCAR OPS 1 cabin safety instructor authorization		
e	Complete initial safety training manager approval interview with CARC flight operations inspector to:		
(1)	Assess the applicant for the comprehensive knowledge of:		
(a)	JCAR OPS 1 and any associated requirements and procedures related to cabin crew training		
(b)	The need for and content of the initial safety training manual		
(2)	Assess the applicant for the familiarity with quality system		

**4. Accountable Manager Recommendation.**

• I hereby certify that, the applicant meets JCARS requirements for the initial safety training manager post and I am satisfied that the information contained in this application is true, correct and completed.
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Name	Signature	Date



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**B. FOR CARC USE ONLY.**

**1. Initial Safety Training Manager Approval - Documents Assessment.**

No.	Assessment Events	YES	NO
a	Check applicant record for the practical experience and expertise in the application of aviation safety standards and safe operating practices		
b	Check applicant record for the five years relevant work experience of which at least two years should be from the aeronautical industry in an appropriate position		
c	Check applicant record for the appropriate management experience in a comparable organization		
d	Check applicant record for holding JCAR OPS 1 cabin safety instructor authorization		
<b>• Assessment Result</b>		<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory	
<b>• Remarks</b>			
<b>Flight Operations Inspector Name</b>		<b>Signature</b>	<b>Date</b>

**2. Initial Safety Training Manager Approval - Assessor Designation.**

• The under signed, Chief Commercial Air Transport Section authorizes Mr.....to conduct the initial safety training manager approval interview.		
<b>Name</b>	<b>Signature</b>	<b>Date</b>

**3. Initial Safety Training Manager Approval - Technical Assessment.** Initial safety training manager approval interview with CARC flight operations inspector:

No.	Assessment Events	YES	NO
<b>a</b>	<b>Assess the applicant for the comprehensive knowledge of:</b>		
(1)	JCAR OPS 1 and any associated requirements and procedures related to cabin crew training		
(2)	The need for and content of the initial safety training manual		
<b>b</b>	<b>Assess the applicant for the familiarity with quality system</b>		
<b>• Interview Date</b>		<b>• Assessment Result</b>	
<input type="checkbox"/> SAT <input type="checkbox"/> UNSAT		<input type="checkbox"/> SAT <input type="checkbox"/> UNSAT	
<b>• Remarks</b>			
<b>Flight Operations Inspector Name</b>		<b>Signature</b>	<b>Date</b>

**C. SUPPORTING DOCUMENTS**

- Cover letter for the initial safety training manager approval application
- Initial safety training manager approval application form - this application form
- Supporting documents the initial safety training manager approval as detailed in this application form part A para 3 a-d