

Flight Operations Standards Department

Type Rating Instructor Rating (TRI) Type Rating Privileges Extended Application Form

| App | licant Name | | | | | | | | |
|-----------------------|--|--------------------|---|---------------|--------------------|--------------|---------------|-------------------|----|
| •Add | ress | | | | | | | | |
| •Mob | oile Tel. No | | | | | | | | |
| •Date | e &Place of Birth | | •National | ality | | | | | |
| •I he | ereby declare that, th | e information give | en in this form is true | & correct. | •Applica | ant Signatu | re | | |
| icatio | on. | | | | | | | | |
| | | Rating Instructor | Rating Type Rating Pr | rivileges Ext | tended to | Further M | PA Types | | |
| • Pres | sent Type Rating Ins | structor Rating Ai | rplane type | | | | | | |
| • Ext | ended Type Rating I | Instructor Rating | Airplane type | | | | | | |
| R-Fligh | nt Crew License H | leld. | | | | | | | |
| • Lic | ense Type & Nu | mber | | • License | Expiry I | Date | | | |
| • Air | plane Type Ratir | ng | | • Type Ra | Rating expiry date | | | | |
| | dical Certificate | | | | | | | | |
| | Class | 11010. | Expiry Date | | Δ. | ME Nama | | Limitation | 20 |
| | | | Expiry Date | | AME Name | | Limitation | | |
| | 1 | 2/IR | | | | | | | |
| Rating | g Privileges Extend | ed to further MI | PA types Requiremen | | | | | | |
| No | | | JCAR-I | FCL Requ | irement | s | | | |
| a | Hold valid JCAR | -FCL. | | PPL [| CPL | MPL MPL | ATP: | | |
| b | Hold valid type ra | ating | | | | | | Valid Until | |
| c | Hold valid JCAR- | | | | ss 2/IR | | Valid Until | | |
| d | · Pre-request F | light experier | Ce. Completed with | in the (12) r | nonths pr | eceding the | e application | on: | |
| | | | de take-offs & landin ar tyne as agreed by | | | nd or co-pi | lot on the | 15 Sectors | |
| | applicable airplane type, or a similar type as agreed by CARC, of which not more than (7) Sectors may be completed in a flight simulator | | | | | | | 7.0 | |
| | | 7 Sectors | | | | | | | |
| e | | | pleted the relevant to ΓΟ (see AMC JCAR- | | | tent of an a | pproveu 1 | Completed | |
| g | | | nplete type rating cou &/or flight simulator | | | | | | |
| ructo | r Recommendat | tion. | | | | | | | |
| • I he | ereby certify that, the | applicant meets | JCAR-FCL 1 requirer | nents for Tv | pe Rating | Instructor I | Rating issue | e skill test on (|) |
| | | * * | • | J. | | | _ | ` | |

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7. Training Post Holder Recommendation.

| • Training Post Holder Name | | • Date | | | |
|---|--|--|--|--|--|
| • TRTO/AOC Name | | • Signature | | | |
| miner Designation. | | | _ | | |
| • The under signed /Chief of Com | mercial Air Transport Section | on authorises TRI Capt. | | to cond | |
| Rating Instructor Rating issue sk | fill test on (| | | T | |
| • Name | | • Date | | • Signature | |
| | | | | | |
| miner Recommendation. (| FIE/CRE notified by CAR | C) | | 1 | |
| ·Date | | ·Departure | | | |
| · TRTO | | ·Destination | | | |
| FS Type & number | | ·Landing time | | | |
| Airplane Type & number | | - Total flight t | ime | | |
| •Take off time | | ·TRI Skill testl | | Passed | |
| •Examiner recommendations | | <u>'</u> | 1 | | |
| •Examiner Name | 1 | •Date | • 5 | Signature | |
| | | | | | |
| | | | | | |
| | | • | | | |
| C Recommendation. | | | | | |
| • TRI Rating issue | Approved | Llou of a TDI(MDA) a | Not approv | | |
| | Approved • The privileges of the ho • The issue of a MPA ty | | _ | | |
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^{*}If the TRI (A) training is carried out in a flight simulator only, the TRI (A) rating will be restricted to exclude emergency/abnormal procedure training in an aircraft. To remove this restriction the holder of a TRI (A) rating shall perform the training contained in AMC JCAR-FCL 1.365 Part 2 Paragraph 8 in an airplane (Flight simulator qualified and approved for ZFTT (for restricted TRI (A))



Flight Operations Standards Department

11. Publications required:

- · Cover Letter from the TRTO for Type Rating Instructor Rating examiner designation.
- · This application form

- Inis application form
 Copy of valid JCAR-Flight Crew License
 Copy of Type Rating Instructor Rating course completion report
 Certified copy of related Log Book Pages
 Copy of valid JCAR-Medical Certificate appropriate class
 After the conduct of the Type Rating Instructor rating skill test.
 This application for the Type Rating classes

 - · Type Rating Instructor Rating skill Test Report