



Flight Operations Standards Department

**Foreign Multi Pilot License (MPL) Conversion Application Form**  
Jordanian nationals only

**1. Personal Details.**

|  |  |              |                      |
|--|--|--------------|----------------------|
| •Applicant Name  |  |              |                      |
| •Address   |  |              |                      |
| •Mobile Tel. No  |  |              |                      |
| •Date &Place of Birth  |  | •Nationality |                      |
| •I hereby declare that, I do not hold or have held JCAR-Professional Flight Crew License<br>•I hereby declare that the information given in this form is true & correct. |  |              | •Applicant Signature |

**2. Application.**

|  |
|--|
| I am applying for the conversion of a foreign Multi Pilot License (MPL) issued by ICAO contracting state into CARC license |
|--|

**3. Foreign Flight Crew License Held**

|   |  |                          |  |
|---|--|--------------------------|--|
| •State of license issue                       |  | •License type & number   |  |
| •License Expiry Date                          |  | •Type rating expiry date |  |
| •Total flight Hrs                             |  | •Total Hrs on type       |  |
| •*Total flying experience in the last 90 days |  |                          |  |

\*Shall have been flown on the applicable aircraft type/class in the last 90 days prior to JCAR type/class revalidation skill test

**4. Foreign Medical Certificate Held.**

| Class | Expiry Date | AME Name | Limitations |
|-------|-------------|----------|-------------|
|       |             |          |             |

**5. Flight Experience. MPL Conversion requirements (Co-pilot in MPA)**

| NO. | JCAR-Requirements   |               |  |
|-----|---|---------------|--|
| a   | Shall be at least 18 years of age   | Date of birth |  |
| b   | Hold valid ICAO Multi Pilot License (MPL)   | Valid Until   |  |
| c   | * Hold valid Type rating multi pilot airplane on ( )  | Valid Until   |  |
| d   | Hold valid ICAO English language proficiency at least level 4. <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 | Valid Until   |  |
| e   | Hold valid ICAO Medical class 1   | Valid Until   |  |
| f   | Hold valid JCAR-English language proficiency at least level 4. <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 | Valid Until   |  |
| g   | Hold valid JCAR-Medical class 1   | Valid Until   |  |
| h   | Pass the required theoretical knowledge examination   |               |  |
| i   | Demonstrate to the satisfaction of CARC the knowledge of the relevant parts of JCAR-OPS & JCAR-FCL 1  |               |  |
| j   | Pass s Type rating (MPA) kill test revalidation requirements  |               |  |

\* If type rating was issued by FTO/TRTO not approved by CARC, the foreign license can be converted with class rating only



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**6. License Verification.**

|   |  |                                     |  |
|---|--|-------------------------------------|--|
| <b>*Does the applicant hold or have held JCAR- Professional Flight Crew License</b> |  | <input type="checkbox"/> <b>YES</b> | <input type="checkbox"/> <b>NO</b>               |
| <b>•Licence holder name</b>   |  | <b>•License type &amp; number</b>   |  |
| <b>•State of license issue</b>  |  | <b>•License Expiry Date</b>         |  |
| <b>•Type Rating Expiry Date</b>   |  |                                     |  |
| <b>•License verification result</b>   | <input type="checkbox"/> <b>Licence Accepted</b> |                                     | <input type="checkbox"/> <b>Licence Rejected</b> |
| <b>•Remarks</b>   |  |                                     |  |
| <b>•Licensing Unit Manager Name</b>   |  | <b>•Date</b>                        | <b>•Signature</b>                                |
|   |  |                                     |  |

\*If the applicant holds JCAR - Professional Flight Crew License, the foreign license cannot be converted

**7. JCAR Theoretical Knowledge Examination.**

| Subjects                             | Exam Date | Exam Time    | Exam result       |
|--------------------------------------|-----------|--------------|-------------------|
| •Air Law                             |           |              |                   |
| •Human performance & Limitations     |           |              |                   |
| •Flight Performance & Planning       |           |              |                   |
| <b>* Licensing Unit Manager Name</b> |           | <b>•Date</b> | <b>•Signature</b> |
|                                      |           |              |                   |

\*Sign after applicant passes all theoretical examination subjects

**8. Examiner Designation.**

|   |              |                   |
|---|--------------|-------------------|
| The under signed/Chief of Commercial air Transport Section authorises <input type="checkbox"/> TRE/ <input type="checkbox"/> SFE Capt.....<br>to conduct Type Rating(MPA) revalidation skill test |              |                   |
| <b>•Name</b>  | <b>•Date</b> | <b>•Signature</b> |
|   |              |                   |

**9. Examiner Recommendation. (TRE/SFE (with valid type rating) notified by CARC)**

|   |  |                                |                                 |
|---|--|--------------------------------|---------------------------------|
| <b>•Date</b>                                    |  | <b>•Departure/Destination</b>  |                                 |
| <b>•TRTO</b>                                    |  | <b>•Landing time</b>           |                                 |
| <input type="checkbox"/> Airplane Type & number |  | <b>•Total flight time</b>      |                                 |
| <input type="checkbox"/> FS Type & number       |  | <b>•JCAR-OPS 1 &amp; FCL 1</b> | <input type="checkbox"/> Passed |
| <b>•Take off time</b>                           |  | <b>•Skill test result</b>      | <input type="checkbox"/> Passed |
| <b>•Examiner recommendations</b>                |  |                                |                                 |
| <b>•Examiner Name</b>                           |  | <b>•Date</b>                   | <b>•Signature</b>               |
|   |  |                                |                                 |



**10. CARC Recommendation.**

|                                   |  |                            |                                       |                      |
|-----------------------------------|--|----------------------------|---------------------------------------|----------------------|
| •MPL Conversion issue             | <input type="checkbox"/> Approved  |                            | <input type="checkbox"/> Not approved |                      |
| •MPL privileges                   | •Exercise all the privileges of a PPL (A).   |                            |                                       |                      |
|                                   | •Exercise the privileges of a CPL (A).   |                            |                                       |                      |
|                                   | •Exercise the privileges of the IR (A) in an airplane required to be operated with a co-pilot.   |                            |                                       |                      |
|                                   | •Act as co-pilot in an airplane required to be operated with a co-pilot  |                            |                                       |                      |
|                                   | <input type="checkbox"/> Exercise the privileges of the IR (A) in a single-pilot operation in airplanes. Provided that the license holder shall have demonstrated an ability to act as pilot in command in a single pilot operation and meeting the requirements as set in FCL 1.210 |                            |                                       |                      |
| •Type Ratings details             | •Airplane type   |                            | •Type Rating expiry date              |                      |
| •License details                  | •MPL   |                            | •License expiry date                  |                      |
| •JCAR-English language Level      | <input type="checkbox"/> 4   | <input type="checkbox"/> 5 | <input type="checkbox"/> 6            | •English Expiry date |
| •JCAR-Medical Class               | • 1  |                            | •Medical Expiry date                  |                      |
| •Remarks                          |  |                            |                                       |                      |
| •Flight Operations Inspector Name |  | •Date                      | •Signature                            |                      |
|                                   |  |                            |                                       |                      |

**11. Publications required.**

- This application form.
- Copy of valid foreign Multi Pilot License
- Copy of valid Type rating (MPA)
- Copy of valid foreign medical certificate class 1
- Copy of valid ICAO English language proficiency at least level 4
- Original Log Book
- Copy of valid passport
- After CARC initial approval.**
  - This application form
  - JCAR Air Law and human performance, limitation examination and Flight Performance & Planning examination result
  - Copy of JCAR-Medical Certificate class 1
  - Copy of JCAR-English language proficiency at least level 4.
- After the conduct of Type rating (MPA) skill test.**
  - This application form
  - Type rating Skill Test Report.
  - Two Photos (2 x 2.5 cm.)