



**Flight Operations Standards Department**  
**Flight Crew Licensing & Training Section - Licensing**  
**Foreign Commercial Pilot License (CPL) Validation Re-issuance Application Form**  
 Activities Other Than Commercial Air Transport

**A FOR APPLICANT USE ONLY**

**1. Personal Details.**

• Applicant Name			
• Address (Jordan)			
• Address (Home)			
• Mobile Tel. No			
• Date & Place of Birth		• Nationality	
• I hereby declare that the information given in this form is true, correct & completed.			• Applicant Signature

**2. Application Details.**

I am applying for the re- issue of foreign CPL validation for Activities other than Commercial air transport			
• Airplane type/Class		• Period of validation	
• Define activity			

**3. JCAR Flight Crew License Held Details. (If applicable)**

• License Type & Number		• License expiry date	
• Type/Class rating details		• Rating expiry date	
• License Status	<input type="checkbox"/> Suspended	<input type="checkbox"/> Revoked	<input type="checkbox"/> Non

**4. Foreign Flight Crew License Held Details.**

• State of license issue		• License Type	
• License Number		• License Expiry Date	
• TR/CR details		• TR/CR expiry date	
• Total flying Hrs		• Total flying Hrs in the activity	
• *Total flying Hrs in the 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 rating (SPA) revalidation skill test

**5. Foreign Medical Certificate Held Details.**

Class	Expiry Date	AME Name	Limitations

**6. Commercial Pilot License (CPL) Activities Other Than Commercial Air Transport Validation Requirements**

No	JCAR-FCL Requirements	Valid Until	
a	Hold valid ICAO <input type="checkbox"/> CPL <input type="checkbox"/> CPL/IR <input type="checkbox"/> ATPL		
b	Hold valid rating. <input type="checkbox"/> Type <input type="checkbox"/> Class <input type="checkbox"/> single engine <input type="checkbox"/> multi engine		
c	Hold valid Foreign medical class 1 certificate		
d	Has at least 700 Hrs in airplane other than TMGs, that includes	Hrs	
	200 Hrs in the activity role for which validation is sought, and	Hrs	
	50 Hrs in the activity role in the last 12 month	Hrs	
e	Hold valid JCAR-Medical class 1 certificate		

**7. Operations Post Holder Recommendation.**

• I hereby certify that, the applicant meets JCARs requirements for Commercial Pilot License (CPL) validation re-issuance on ( ), for the activities other than Commercial Air Transport ( ), and having checked the applicant log book, license, medical and records, I am satisfied that the information contained in this application form is correct			
• Operations Post Holder Name		• Date	
• Operator Name		• Signature	



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**B FOR CARC USE ONLY**

**1. License Verification.** (If applicable)

• Licence holder name		• State of license issue	
• License type		• License number	
• License Expiry Date		• C/T Rating expiry date	
• License verification result	<input type="checkbox"/> License accepted		<input type="checkbox"/> License rejected
• Remarks			
<b>Licensing Unit Manager Name</b>		<b>Signature</b>	<b>Date</b>

**2. CARC Recommendation.**

• License validation issuance	<input type="checkbox"/> Approved		<input type="checkbox"/> Not approved	
• The defied activity				
• Validation privileges	<input type="checkbox"/> Pilot on command on single pilot, single engine airplane in other than Commercial air transport <input type="checkbox"/> Pilot on command on single pilot, multi engine airplane in other than Commercial air transport			
• Validation expiry date				
• Foreign license expiry date		• T/C Ratings expiry date		
• Foreign Medical Class	• 1	• Medical Expiry Date		
• JCAR-Medical Class	• 1	• Medical Expiry Date		
• Operator name				
• Remarks				
<b>Flight Operations Inspector Name</b>		<b>Signature</b>	<b>Date</b>	

**C SUPPORTING DOCUMENTS**

- Cover Letter from the operator for the Commercial Pilot License (CPL) validation re-issuance
- This application form.
- Copy of JCAR Flight Crew License if held
- Copy of valid Foreign CPL. (valid license/valid type-class rating (SPA)
- Copy of valid Foreign medical class 1 certificate
- Copy of valid passport
- Copy of related log book pages
- Copy of valid JCAR Medical class 1 certificate
- One photo