

# Flight Operations Standards Department Flight Crew Licensing & Training Section - Ratings

## Type Rating Multi Pilot Airplane Renewal Application Form

Airplane or flight simulator - Type Rating Multi Pilot Airplane is valid for 1 year

## A. FOR APPLICANT USE ONLY

| <ol> <li>Personal I</li> </ol> | Jetails. |
|--------------------------------|----------|
|--------------------------------|----------|

| Applicant Name                 |  |                     |
|--------------------------------|--|---------------------|
| • Address                      |  |                     |
| Mobile Tel. No                 |  |                     |
| • Date &Place of Birth         | Nationality  |                     |
| I hereby declare that the info | rmation given in this form is true, correct & completed. | Applicant Signature |

## 2. Application Details.

| • I am applying for Type Rating (MPA) Renewal on ( |   |
|--|---|
| ● I am applying for Type Rating (MPA) Renewal on ( | ) |

## 3. JCAR Flight Crew License Held Details.

| License Type & Number           | License Expiry Date |
|---------------------------------|---------------------|
| Type Rating expiry date         | Air Plane Type      |
| • Flight experience last 90 day |                     |

#### 4. JCAR Medical Certificate Held Details.

| Class |        | Expiry Date | AME Name | Limitations |
|-------|--------|-------------|----------|-------------|
| □ 1   | □ 2/IR |             |          |             |

## 5. Type Ratings Renewal Requirements.

| No | JCAR FCL 1 Requirement  |  |             |  |  |  |
|----|---|--|-------------|--|--|--|
| a  | Shall meet refresher training minimum requirements as detailed below, a & b           |  |             |  |  |  |
|    | ☐ Rating expired up to 3 calendar months  | Session No.  |             |  |  |  |
|    | ☐ Rating expired up 12 calendar months 2 session FSTD                                 |  | Session No. |  |  |  |
|    | ☐ Rating expired up 24 calendar months  Type refresher ground school & 3 session FSTD |  | Session No. |  |  |  |
|    | ☐ Rating expired by 36 calendar months  | Type refresher ground school & 4 session FSTD  Type refresher ground school & 5 session FSTD | Session No. |  |  |  |
|    | ☐ Rating expired by 48 calendar months  | Session No.  |             |  |  |  |
|    | □ Rating expired more than 48 calendar months Full type rating course is required     |  |             |  |  |  |
| b  | Pass Proficiency check in accordance with Appendices 1 and 2 to JCAR-FCL 1.240        |  |             |  |  |  |

#### 6. Instructor Recommendation

| • I hereby certify that, the applicant meets JCAR FCL 1 requirements for Type Rating (MPA) Renewal on ( |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|
| Instructor Name Signature Date  |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |

## 7. Training Post Holder Recommendation.

| • I hereby certify that, the applicant meets JCARs requirements for Type Rating (MPA) Renewal on ( ), and I have checked           |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| the applicant license, log book, medical and records, I am satisfied that the information contained in this application is correct |  |  |  |  |  |  |
| • Training Post Holder Name • Date   |  |  |  |  |  |  |
| • TRTO Name • Signature  |  |  |  |  |  |  |

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#### B. FOR CARC USE ONLY

## 1. Examiner Designation.

| • The under signed, Chief of Flight Crew licensing & Training Section authorises the □ TRE □ SFE Capt |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| to conduct type rating (MPA) on ( ) renewal proficiency check   |  |  |  |  |  |  |
| Name Signature Date   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| ·   |  |  |  |  |  |  |

#### 2. Examiner Recommendation. (TRE/SFE notified by CARC)

| • Date                   | Departure                |          |  |
|--------------------------|--------------------------|----------|--|
| TRTO name                | Destination              |          |  |
| ☐ Airplane Type & number | Landing time             |          |  |
| ☐ FS Type & number       | Total flight time        |          |  |
| Take off time            | Proficiency check Result | □ Passed |  |
| Examiner recommendations |                          |          |  |
| Examiner Name            | Signature                | Date     |  |
|                          |                          |          |  |

#### 3. CARC Recommendation.

| Type rating renewal              | ☐ Approved     |                    |       |                     |              | □ Not approved |  |
|----------------------------------|----------------|--------------------|-------|---------------------|--------------|----------------|--|
| Type ratings details             | Air plane Type |                    |       |                     | Type Ratings | expiry date    |  |
| License details                  | $\square$ PPL  | □ CPL □ MPL □ ATPL |       | License expiry date |              |                |  |
| JCAR English language Level      | □ 4            | □ 5 □ 6            |       | English expiry date |              |                |  |
| JCAR Medical Class               | □ 1            | □ 2/IR             |       | Medical expiry date |              |                |  |
| Remarks                          | • Remarks      |                    |       |                     |              |                |  |
| Flight Operations Inspector Name |                | Sign               | ature | Date                |              |                |  |
|                                  |                |                    |       |                     |              | _              |  |

#### C. SUPPORTING DOCUMENTS.

- Cover letter from TRTO for type rating renewal
- This application form
- Copy of valid JCAR FCL PPL/ CPL/MPL/ATPL
- Certified Copy of related log book pages
- Copy of valid JCAR Medical certificate applicable class
- Type Rating (MPA) proficiency checks Report

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