



Flight Operations Standards Department
Flight Crew Licensing & Training Section – Theoretical Training Organization
TTOs Head of Training Approval Application Form

A. FOR APPLICANT USE ONLY.

1	Organization Name		
2	Type of Training		
3	Nominated Head of Training Name		
4	*Qualifications Relevant to Head of Training Post		
5	*Work Experience Relevant to Head of Training Post		
6	Nominated Post Holder. I hereby declare that the information given in this form is true, correct & completed.		
	Name	Signature	Date
7	Accountable Manager. I hereby declare that the applicant is nominated for head of Training Post		
	Name	Signature	Date

B. FOR CARC USE ONLY.

1	Requirements	YES	NO
a	Hold ground instructor authorization relevant to the approved training courses		
b	Possess a sound managerial capability		
c	Comprehensive knowledge of:		
	• JCARs and advisory circulars related to the theoretical training		
	• Organization training manual		
d	Familiarity knowledge with quality system		
2	Nominated Flight Operations Post Holder	<input type="checkbox"/> Approved	<input type="checkbox"/> Rejected
	• Remarks (if rejected only).		
	Approving Inspector Name	Signature	Date

*Attach copy of relevant certificate