CARC	**Validation of Protected Rights Form**

Last name: ……	Date of birth: ……
First name: ……..	Place of birth: ……
Licence Part 65 (type and No.): ……..…….....	Date of issue: …… Date of renewal: ……

Address:

……
……
……

Experience (if applicable):

Date and signature of the applicant	
Licence Part 66 delivered by CARC	
Date and sign of validation by CARC	

المملكة الأردنية الهاشمية
هيئة تنظيم الطيران المدني
CIVIL AVIATION REGULATORY COMMISSION
THE HASHEMITE KINGDOM OF JORDAN