

Flight Operations Standards Department Flight Crew Licensing & Training Section - Licensing Student Pilot License (SPL) Issuance Application Form

A. FOR APPLICANT USE ONLY

1. Personal Detai	ls.
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Applicant Name		
Address		
Mobile Tel. No		
Date &Place of Birth	Nationality	
I hereby declare that the information of the second o	mation given in this form is true, correct & completed.	Applicant Signature

2. Application.

• I am applying for the issue of a Student Pilot License Airplane (SPL) for:					
\Box PPL	☐ CPL integrated course ☐ CPL/IR integrated course				
☐ CPL/IR ATP integrated course		☐ MPL course			

3. Flight Crew License Held Details. (if applicable)

☐ **Applicant for Integrated Courses** (Holding PPL A/H)

• License Type & Number	State of license issue				
• Requirements	• Valid PPL(A/H) issued in accordance with ICAO Annex 1	Valid until			
• Requirements	Total flight Hrs	Hrs			
	• 50% of the aircraft Hrs flown may be credited towards the required flight instruction, and up to				
Flight Hrs credit	• (40) Hrs flying experience or (45) Hrs if an airplane night flying qualification has been obtained				
	of which up to (20) Hrs may be dual instruction				

☐ Applicant for PPL (A) Course (Holding Micro Light & Glider A/H Pilot License)

• License type & Number	State of license issue			
• Dogwinsments	Valid Micro Light & Glider (A/H) Pilot License	Valid until		
Requirements	Total flight Hrs	Hrs		
• Flight hour credit	• Applicant may be credited with 10% of their total flight time as pilot-in-command in such aircraft up to maximum of (10) Hrs towards a PPL (A)			

4. JCAR-Medical Certificate Held Details.

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

5. Student pilot license (SPL) Issuance Requirements.

No	JCAR-FCL Requirements					
a	Shall be at least (17) years before enrolment date	Date of birth				
b	Shall hold a high school certificate (Passed Tawjeehi) or equi	Passed				
c	Hold valid JCAR-Medical □ Class 1 □ Class 2/IR □	Valid until				
d	Flight crew license & required medical relation					
	For PPL at least Class 2 medical	For CPL Class 1 medical				
	For PPL/IR at least Class 2 with IR medical	For CPL/IR Class 1 medical				

6. Head of Training Declaration.

• I hereby certify that, the Applicant enrolled on a course of flight & theoretical knowledge instruction for the issue of a Pilot					
License and ratings for the course indicated in Section 2 of this form, meets all JCAR requirements for SPL issue					
• Head of Training Name • Date					
• FTO Name	• Signature				

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B. FOR CARC USE ONLY

1. License Verification. (if applicable)

Licence holder name	License type & number					
State of license issue		License Expiry Date				
Airplane type/class		• Type/class Rating Expiry Date				
• License verification result	☐ License Accepted	ense Accepted License Rejected				
Remarks						
Licensing Uni	it Manager Name	Signature	Date			

2. CARC Recommendation.

• Student pilot license issuance	☐ Approved ☐ Not approved			1			
• SPL issuance for	□ PPL course				☐ CPL integrate	ed course	☐ CPL/IR integrated course
• SFL issuance for	☐ CPL/IR ATP integrated cours			egrated cour	se	se	
 Applicant flight Hrs credit 	☐ Eligible ☐ Not eligible			ot eligible	• Flight hour C	redit	
 License details 	• SPL				 License expir 	y date	
• JCAR-Medical Class	□ 1 □ 2/IR □ 2			□ 2	 Medical Expi 	ry Date	
• Remarks							
Flight Operations Inspector Name			Signa	ature	Date		

C. Supporting Documents.

- Cover Letter from the FTO for Student Pilot License issue.
- This application form.
- Certified copy of high school certificate (Passed Tawjeehi) or equivalent.
- Certified copy of valid passport.
- Copy of valid JCAR-medical certificate appropriate class.
- One photo.
- IF the applicant holds flight crew license and looking for flight Hrs credit:
 - Copy of valid flight crew license.
 - Original log book.

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