

Flight Operations Standards Department

Flight Crew Licensing & Training Section - Ratings

Synthetic Training Instructor (STI) Renewal Application Form

FNPT II or BITD - All instructor ratings and authorizations are valid for period of 3 years

A. FOR APPLICANT USE ONLY

| 1. | Persona | l Details. | | | | | | | | | |
|----|---|--|--|------------------------------------|----------|----------------|------|--|--|--|--|
| | Applie | cant Name | | | | | | | | | |
| | • Address | | | | | | | | | | |
| | • Mobil | e Tel. No | | | | | | | | | |
| | • Date & | &Place of Birth | | Nationality | | | | | | | |
| | • I hereby declare that the information given in this form is true, | | | orrect & completed. | • Applio | eant Signature | | | | | |
| 2. | Application Details. | | | | | | | | | | |
| | • I am a | pplying for Synthetic Tr | raining Instructor Authorization Re | enewal on FNPT BITD | | | | | | | |
| 3. | JCAR F | light Crew License F | | | | | | | | | |
| | • Licens | se Type & Number | | License Expiry Date | | | | | | | |
| 4. | Syntheti | | | | | | | | | | |
| | No. | | | CL Requirements | | | | | | | |
| | a | | | ght simulator or FNPT II, and co | | Hrs | | | | | |
| | | Section 3 B of the proficiency check set out in Appendix 3 to JCAR-FCL 1.240 for the appropriate type or class of airplane in a flight simulator or FNPT II on which instruction is routinely conducted; or | | | | | | | | | |
| | | | leted at least (3) Hrs refresher trai | ning in a | Hrs | | | | | | |
| | | | a proficiency check covering on | ly those exercises listed in Appen | | Passed | | | | | |
| | | r the supervision arpose. At least (1) | | | | | | | | | |
| 5. | Instruct | Instructor Recommendation. | | | | | | | | | |
| | | eby certify that, the app iency check on □ FS / F | e applicant meets JCAR FCL 1 requirements for Synthetic Training Instructor Authorization renewal FS / FNPT II BITD | | | | | | | | |
| | • | | tor Name | Signature | | Date | | | | | |
| | | | | | | | | | | | |
| 6. | 6. Head of Training Recommendation. | | | | | | | | | | |
| | | • I hereby certify that, the applicant meets JCARs requirements for Synthetic Training Instructor Authorization Renewal proficiency | | | | | | | | | |
| | | check on □ FS / FNPT II □ BITD , and I have checked the applicant license, log book and training records, I am satisfied that the information contained in this application is correct | | | | | | | | | |
| | Head of Training Name Date | | | | | | | | | | |
| | | TRTO Name | | • Signature | | | | | | | |
| n | | | | ~-B | l | | | | | | |
| В. | FOR CA | ARC USE ONLY | | | | | | | | | |
| 1. | Examiner Designation. | | | | | | | | | | |
| | • The under signed, Chief of General Aviation Section authorises □ FIE □ SFI Capt | | | | | | luct | | | | |
| | | | ame | Signature | | Date | | | | | |
| | | | | . | | - | | | | | |

CARC Form 28 - 4100 Page 1 of 2



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FNPT II or BITD - All instructor ratings and authorizations are valid for period of 3 years

2. Examiner Recommendations. (FIE/SFI notified by CARC)

| • Date | | Departure | |
|----------------------------|--|---------------------|----------|
| • FTO/TRTO Name | | • Destination | |
| ☐ FNPT II type & number | | Landing time | |
| □ BITD | | • Total flight time | |
| Take off time | | Proficiency check | □ Passed |
| • Examiner recommendations | | | |
| Name | | Signature | Date |
| | | | |

3. CARC Recommendation.

| STI Authorization renewal | ☐ Approved | | ☐ Not approved | |
|---|--|--|----------------|--|
| • STI privileges (FSTD only) | To carry out synthetic flight instruction on □ FNPT □ BITD for: | | | |
| | • Issue of a license | | | |
| | Issue of an instrument rating and class or type rating for single pilot airplanes | | | |
| | ☐ Core flying skills training of the MPL (A) integrated training course provided that he has | | | |
| | successfully completed the MPL (A) Instructors Training course | | | |
| Instructor rating details | Synthetic Training Instructor | Authorization expire | ry date | |
| • License details | | License expiry date | | |
| • Remarks | | | | |
| Flight Operation | s Inspector Name | Signature | Date | |
| | · | | | |

C. SUPPORTING DOCUMENTS.

- Cover Letter from the FTO/TRTO for synthetic training instructor authorization renewal
- This application form
- Copy of JCAR Flight Crew License
- Copy of Refresher training records.
- Certified copy of related log book pages
- After the conduct of the synthetic training instructor authorization proficiency check:
 - This application form
 - Synthetic training instructor authorization proficiency check report

CARC Form 28 - 4100 Page 2 of 2