

Flight Operations Standards Department

Flight Crew Licensing & Training Section - Flying Training Organizations

## FTOs & TRTOs Approval Variation Application Form

Submit at least 30 days before intended date of variation

## 1. Applicant Details.

Organization Name	• Туре	e of Approval	□ FTO	□ TRTO
Address				
Head of Training Contact	Name	Phone Number	E-1	Mail
Details				

# 2. Approved Training Courses Details.(as define in JCAR FCL)

No	Course Title	No	Course Title
1		6	
2		7	
3		8	
4		9	
5		10	

## 3. Approved Management Structure Details.

Post	Name	Phone No.	E-Mail
Head of Training			
Chief Flying Instructor			
Chief Ground Instructor			
Quality Manager			

# 4. Training Staff Details.

Number of flight instructors employed	
Number of ground instructors employed	

# 5. Approved Training Facilities Details.

## (a) Flight Operations Accommodation.

Туре	Location	Size	Number
Operations Room			
Planning Room			
Briefing Room			
Rest Room			
Staff Office			
• Hanger			

## (b) Theoretical Instruction Facilities.

Туре	Location	Size	Number
Class Room			
Rest Room			
Staff office			



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# 6. Approved Flight Synthetic Training Devices Details.

No	FSTD (BITD, FTD, FNPT I, FNPT II, FNPT II – MCC, FFS – A/B/C/D)	Serial
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

## 7. Approved Training Aircraft Type Details.

# (a) \*Single Engine. (FTO only)

No	А/С Туре	Registration Number	IFR Equipment
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

\*Note: For FTO's offering the CPL(A) course that intend to have a SEP aeroplane available for licence skill tests, the aircraft listing must include at least one single-engine piston aeroplane, certificated for the carriage of at least 4 persons with a variable pitch propeller and a retractable undercarriage

## (b) Multi Engine. (FTO only)

No	A/C Type	Registration Number	IFR Equipment
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			



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## (c) Type Rating Aircraft. (TRTO only and if applicable)

No	А/С Туре	<b>Registration Number</b>	IFR Equipment
1			
2			
3			
4			
5			

### 8. Approved Manuals Details.

Manual/ Documentation	Approved Date
Operations Manual	
Training Manual	
Quality Manual	
Safety management system manual	

#### 9. Approved Quality System Details.

Audit Time Scale	Audits Numbers
Audits Scheduled since last CARC audit	
Audits completed since last CARC audit	
Scheduled Audits still to be commenced	

### 10. Required Approval Variation.

### (a) Variation Area.

Operator Name is changed	□ Operator location ( principle place of businesses) is changed
□ New training course added	□ Expiration date for approval period of validity

#### (b) Variation Area Details.

11. \*Variation Application Form Attachments. For Operator Name change, Operator location change and New training course add the required attachments are:

Manual/ Documentation		
<ul> <li>Variation study fees slip</li> </ul>		
<ul> <li>Variation approval process form</li> </ul>		
Operations Manual		
Training Manual		
Safety management system manual		
Quality Manual		
Course program		

\*For Expiration date of the approval period of validity refer to Approval Issue

# 12. Accountable Manager Declaration.

I hereby apply for the above named  $\Box$  Flight Training Organisation  $\Box$  Type Rating Training Organization for Approval Variation in compliance with Appendix 1 to JCAR FCL 1., and I certify that, the information contained in this application is true, corrected and completed

Name	Signature	Date