



Flight Operations Standards Department
Flight Crew Licensing & Training Section - Flying Training Organizations
FTOs & TRTOs Approval Revalidation Application Form

Submit at least 30 days before Approval certificate expiry date

1. Applicant Details.

• Organization Name		• Type of Approval	<input type="checkbox"/> FTO	<input type="checkbox"/> TRTO
• Address				
• Head of Training Contact Details	Name	Phone Number	E-Mail	

2. Approved Training Courses Details.

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 the employed flight instructors	
• Number of the employed ground instructors	

5. Number of Students Details. (by course)

Approved Course Name	Number of Students
•	
•	
•	
•	
•	
•	
•	
•	

6. Approved Training Facilities Details.

(a) Flight Operations Accommodation.

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



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(b) Theoretical Instruction Facilities.

Type	Location	Size	Number
• Class Room			
• Rest Room			
• Staff office			

7. 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		

8. Approved Training Aircraft Type Details.

(a) *Single Engine. (FTO only)

No	A/C Type	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



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(b) Multi Engine. (FTO only)

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

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

No	A/C Type	Registration Number	IFR Equipment
1			
2			
3			
4			
5			

9. Financial Details.

Financial Requirements	
• Capital expenditure necessary to provide the planned facilities	
• Costs associated with running each of the courses for which approval is sought	
• Income forecasts for the period of approval	
• A forecast financial operating statement for the business for which approval is sought	
• Details of any other financial trading arrangement on which the viability of the approved organisation may be dependent	

10. Application Form Attachments.

• A forecast financial operating statement for the business for which approval is sought
• Details of any other financial trading arrangement on which the viability of the approved organisation may be dependent

8. Accountable Manager Declaration.

I hereby apply for the above named <input type="checkbox"/> Flight Training Organisation <input type="checkbox"/> Type Rating Training organization Approval revalidation in compliance with Appendix 1 to JCAR FCL <input type="checkbox"/> 1.055 / <input type="checkbox"/> 2.055, and I certify that, the information contained in this application is true, corrected and completed		
Name	Signature	Date