



Flight Operations Standards Department
General Aviation & Training Section
FTOs/TRTOs Head of Training Approval Application Form
 Appendix 1(a) to JCAR-FCL2.055 Point 14 & Appendix 2 to JCAR-FCL 1.055 Point 12

A. FOR APPLICANT USE ONLY.

1	Operator Name			
2	Nominated Head of Training Name	<input type="checkbox"/> FTO	<input type="checkbox"/> TRTO	
3	*Qualifications Relevant to Head of Training Post			
4	*Work Experience Relevant to Head of Training Post			
5	Nominated Post Holder. I hereby declare that the information given in this form is true, correct & completed.			
	Name	Signature	Date	
6	Accountable Manager. I hereby declare that the applicant is nominated for head of Training Post			
	Name	Signature	Date	

B. FOR CARC USE ONLY.

1	Requirements	YES	NO
a	<input type="checkbox"/> TRTOs. Shall have had extensive experience in training as type rating instructor for professional pilot licenses <input type="checkbox"/> FTOs. Shall have had extensive experience in training as a flight instructor for professional pilot licenses		
b	hold or have held in the three years prior to first appointment as a HT, a professional pilot license and rating(s) issued in accordance with ICAO Annex 1, related to the flying training courses conducted		
c	Possess a sound managerial capability		
d	Comprehensive knowledge of: <ul style="list-style-type: none"> • JCAR FCL 2 • Organization operations manual • Organization training manual 		
e	Familiarity knowledge of: <ul style="list-style-type: none"> • Quality System • Safety management system 		
2	Nominated Flight Operations Post Holder	<input type="checkbox"/> Approved	<input type="checkbox"/> Rejected
	• Remarks (if rejected only).		
	Approving Flight Crew Licensing Inspector Name	Signature	Date

*Attach copy of relevant certificate

