Licence, Rating, Authorisation Or Validation Certificate Application – CCAA PEL 002								
Issue	Renewal	val 🗌 Re-issue 🗌 Adding ra		ting Adding Authorisatio		on	Knowledge/Skill Test	
I. APPLICA	TION INFOR	MATION						
 Student Pilot Authorisation Private Pilot Licence(A) Commercial Pilot Licence(A) Airline Transport Pilot Licence (A) Private Pilot Licence (H) Commercial Pilot Licence (H) Airline Transport Pilot Licence (H) Instrument Rating (A) Instrument Rating (H) Class Rating Type Rating 					 Cat II Authorisation Cat III Authorisation Flight Instructor Authorisation Instructor additional type Rating Instructor SFT Authorisation Examiner Authorisation Flight Engineer Licence Validation Certificate 			
A. Name:					ate of birth nm/yy):	C. Place	of birth:	
D. Address:				E. Na	ationality:			
				F. He	eight:	G. Weig	ht:	
				H. So □ M □ Fe		I. Hair:		
						J. Eyes:		
K . Do you no have you eve Curaçao licer	r held a	L. If yes, has licent suspended or revok		M. T	Type of licence:	O. Date	issued:	
□ Yes		□ Yes, date:		N. N	umber:			
□ No		□ No						
P. Do you ho certificate?	ld a medical	Q . Class of certific	ate:	R . D	ate issued:	S. Name	e of examiner:	

II. LICENO OF :	CE, RATIN	G, AUTHORI	SATIC)N OR VA	ALIDATION CE	RTIFICA	TE APPLIEI	D FOR ON BASIS		
□ A. Completion of required knowledge test		1. Knowledge to licence/rating su			eted	2. Date of completion of knowledge test:				
□ B . Completion of required skill test/proficiency check		1. Aircraft to be (<i>if flight test required</i>):	used	ed 2a. Total time in this aircraft: hours		2b. Pilot in command: hours				
□ C. Graduate from integrated course		1. Name and loo	cation of	of ATO:		2. ATO Number:				
of appr training	roved	3. Course from	which	graduated:		4. Date:				
D. Militar compet		1. Service:	2. Date rated:			3. Rank or grade and service number:				
obtaine		4 . Has flown at least 10 hours as pilot in command during the past 12 months in the following military aircraft:								
		5. Date of check in past 12 months:								
E. Holder licence	of foreign issued by:	1. Country:2. Grade of licence:			of licence:	3. Number:				
		4. Ratings:								
III. RECOR	RD OF PIL	.OT TIME								
	Total	Instruction Rec'd	Solo	PIC	Co-pilot	Cross Country	Instrument	As Flight Instructor		
Aeroplane										
Helicopter										
	Night instruction Rec'd	Night take- off/landing		Hours for renewal	Date of hours for renewal					
Aeroplane										
Helicopter										

IV. Applicant's Cer	tification	A. Signature :	B . Date :	
I certify that the sta application are true	tements made by me on this			
CCAA Use Only				
INSTRUCTOR'S	RECOMMENDATION			
	nstructed the applicant and co			
Date	Instructor's Signature (Print Name and Sign)	Instructor's No.	Instructor Rating expires:	
Aviation Training The applicant has s	Organization: uccessfully completed our		approved cour	rse,
	d for		test.	,
Date	ATO name	ATO number	Signature	
2				

DESIGNATED EXAMINER'S REPORT

- □ I have personally reviewed this applicant's pilot logbook and/or training record, and certify that the individual meets the pertinent requirements of CCARs Part 2 for the licence, rating, Authorisation or certificate sought.
- □ I have personally tested/checked this applicant in accordance with pertinent procedures and requirements with the results indicated below.
 - \Box Approved
 - Disapproved Notice of Disapproval issued (Original Attached)
- □ I have personally checked
 - \Box the language normally used in the State
 - \Box the national language
 - \Box the English language
 - \Box or other language

□ Renewal of rating: the new validity date of the rating has been indicated on the licence

□ Renewal of Authorisation: the new validity date of the CAT II/III Authorisation has been indicated on the licence

Location of test (Facility, City):				Duration of te	est:	t: Ground: SFT: Flight:			
Licence, rating or Authorisation for which tested:				Type(s) of aircraft used:		Registration No.(s):			
Date:	te: Examiner's signature (Print Name & Sign):			Authorisation	No.:	Authorisation expires:			
EVALUATOR'S RECORD (USE FOR ATPL AND/OR TYPE RATINGS)									
		Inspector	Ex	xaminer	Signa	ature and Licence Number	Date		
Oral									
Simulator/Training Device Check									
Aircraft Flight Check									

Aviation Safety Inspector/ Officer Report

I have personally tested/checked this applicant in accordance with pertinent procedures and requirements with the result indicated below.

- \Box Approved
- Denial Notice of Denial attached (Original Attached)

I have personally checked

- \Box The language normally used in the State
- □ The national language
- □ The English language
- \Box Or other language

Location of test (Facility, City):		Duration of test:	Ground: SFT: Flight:
Licence, rating or Authorisation for wh tested:	nich	Type's of aircraft used:	Registration No.(s):
Inspector's signature (Print Name & Si	ign):	Date:	□ Renewal of Licence:
Attachments	Applicar	nt identification	·
 Student pilot Authorisation (copy) Knowledge Test Report Skill Test Report Proficiency Check Report Notice of Denial Letter of Discontinuance Graduation Certificate (copy) Identification document (copy) Endorsement from instructor (if relevant block has not been completed) Verification of authenticity of foreign licence 	ID Name Number: Date of b Expiratio Telephon Licence	ID :	

CCAA REPORT								
 Exar Issue Issue Re-i; Issue Re-i; Issue Re-i; Re-i; Rene Rene Re-i; 	ent Pilot Authorisat miner's Recommend Accepted e of flight crew lices ewal of flight crew lices ssue of flight crew lices e of rating ewal of rating ssue of rating ssue of rating e of Authorisation ewal of Authorisation e of Authorisation e of Validation Cert	dation Rejected nce licence icence on	Licence based on: Knowledge test Integrated course Skill test Military competence Foreign licence					
Training course name:			Graduation Certificate No.	Date				
Date:		Staff signature (Print name & sign):						