

For Official Use Only

Ref : _____

Details of Nominated Personnel to be Accepted

(Please tick appropriated box)

Quality Manager for AOC

**MAR-145 Management
Personnel**

**MAR-147 Management
Personnel**

1. **Organisation :** _____

2. **Approval Number relevant to the item (1) :** _____

3. **Name :** _____

4. **Position :** _____

5. **Qualifications relevant to the item (4) Position :**

6. **Work experience relevant to the item (4) Position :**

Nominee
Signature _____ Date _____

Accountable Manager
Signature _____ Date _____

On Completion, please send this form under confidential cover to the Civil Aviation Authority.

AACM use only

Name and signature of authorised AACM staff member accepting this person :

Signature _____ Date _____

Name and Position _____

Please cross this page if NO supplementary information provided; or

Supplementary information provided as below (enclosing additional _____ pages)