

For Official Use Only

Ref : _____

Details of Management Personnel as Specified in MAR-145 or MAR-147

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 :

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 _____