

Official Use Only				
Application no.:				
Date:/				
PID no:				

Passport No.

Macao ID No. (if applicable)

## **Application For Flight Crew License And/Or Rating**

SECTION 1	PERSONAL.	
SECTION I	PERSONAL	· DB. LAILS

Place and Date of Birth (dd/mm/yyyy)

Family Name

Telephone

Home:	M	Iobile:		Emai	1:					_	
Residential Ad	dress										
Postal Address (if different)											
Company					Job	Title					
SECTION 2	LICENS	E / RATI	NG REQ	UESTED							
□ *Flight Cr	ew Licenso	e:   Com	mercial /	☐ Airline [	Transport (	□ Aeropla	ne / 🗆 Heli	copter)	**Section 3 r	equired**	
		( If app	licable, cı	urrent AAC	CM License	Number _		/ CPL(	)/	)	
Aircraft T	ype Rating	g:						( [	$\square$ $PIC/\square$	Co-pilot )	
Rating:	☐ Instrume	ent (□ wi	th CAT II	- flight h	ours on typ	ne:	) **,	Section 3 red	quired**		
	☐ Instructo									:)	
Other:											
*For Flight Crew Li	cense applica	tion, Aircrafi	Type Rating	g shall also be	e applied. Inst	rument Rating	shall be appli	ed if applica	ble		
Flight check(s)	completed						Т-	ma of Cha	ale		
$\square_{Aircraft}$	*Date (dd/mm/yyyy)  Aircraft / Simulator				'	Type of Check					
$\square_{Aircraft}$											
*Date of which the t					<u> </u>						
SECTION3	AERON	AUTICAI	L EXPER	RIENCE (F	or Flight Cre	w License or	Instrument R	ating applica	tion only)		
Note: For Flight (	Crew License	application -	fill all appl	icable column	is.	ere in aross co	untro as DIC s	hould be cou	nted for colum	m (0)	
Aeroplane	(1)	(2)	(3)	(4)		ument	(7)	hould be counted for column (9).  Cross-country		(10) Total	
Category	Dual	Co-pilot	PIC	PICUS*	(5) Simulated	(6) Actual	Night	(8) Dual	(9) PIC / PICUS*	(10) 10ta1 $(1) + (2) + (3) + (4)$	
Single-engine											
Multi-engine											
Total hours										Total Flight Hours	
<b>Helicopter</b> Category	(1) Dual	(2) Co-pilot	(3) PIC	(4) PICUS*	(5) Simulated	(6) Actual	(7) Night	Cross- (8) Dual	-country (9) PIC / PICUS*	(10) Total (1) + (2) + (3) + (4)	
Single-engine											
Multi-engine											
Total hours										Total Flight Hours	
*PICUS – co-pilot a PEL/APP/001a (R			under the si	upervision of i	the pilot-in-co	mmand					

Given Names

Nationality

## SECTION 4 DECLARATION BY APPLICANT

## **Personal Information Collection Statement**

- 1. Personal data provided in this form and all submitted documents will be used for processing of the application only.
- 2. Base on fulfilling legal obligations, such information may also be referred to the police authorities, judicial and other authority entities.

I certify that the information provided on this form is true to the best of my knowledge and belief. I have also best understanding to the above Personal Information Collection Statement.

Applicant Signature	Date
FOR OFFICAL USE ONLY	dd/mm/yyyy
□ ACCEPTED:	□ REJECTED:
License Type:	because:
Aircraft Type:	
	Signature: Date:/
Rating: (valid until:/)	Remarks:
Medical class Exam Date:/ (valid until:/)	
( AME:)	
English Level Exam Date:/ (valid until:/)	
Signature: Date:/	