

	<b>SIERRA LEONE CIVIL AVIATION AUTHORITY</b>		Reference	FORM:AC-PELO19
	<b>Issue, Renewal, Reissue, Rating, Type Rating, Conversion/Validation Certificate Authorisation Application For Aircraft Maintenance Engineering License</b>		Revision	01
			Date	31 <sup>ST</sup> AUGUST 2022
<b>I. A.</b> <input type="checkbox"/> Issue <input type="checkbox"/> Renewal <input type="checkbox"/> Re-issue <input type="checkbox"/> Adding rating		<input type="checkbox"/> Conversion <input type="checkbox"/> Validation Certificate		
<b>B</b> <b>Airframe</b> <input type="checkbox"/> Unpressurized Metal Airframe <input type="checkbox"/> Pressurized Metal Airframe <input type="checkbox"/> Basic Helicopter Airframe		<b>Powerplant</b> <input type="checkbox"/> Piston Engine <input type="checkbox"/> Gas Turbine engine <input type="checkbox"/> Others		<b>Avionics</b> <input type="checkbox"/> DC. Electrics <input type="checkbox"/> AC Electrics Frequency Wild <input type="checkbox"/> AC Electrics Constant Frequency <input type="checkbox"/> Aircraft General Instrument <input type="checkbox"/> Autopilot <input type="checkbox"/> Airborne Radio and Radar <input type="checkbox"/> Direct Reading Compass <input type="checkbox"/> Remote Reading Compass
<b>II. Application Information</b>				
A. Name (Surname, First, Middle)		B. Date of birth (dd/mm/yyyy)		C. Place of birth
D. Address (city/state)		E. Nationality		F. Height
		G. Weight	H. <input type="checkbox"/> Male <input type="checkbox"/> Female	I. Hair      J. Eyes
K. Do you now hold, or have you ever held a Nigerian or any other CAA license? <input type="checkbox"/> Yes <input type="checkbox"/> No		L. If yes, has license ever been suspended or revoked <input type="checkbox"/> Yes .....date <input type="checkbox"/> No		M. Type of license N. Number
O. Date issued and issuing Authority (dd/mm/yyyy)		P. Name of Employer.      Q. Employed At (city/state)      R. Employed As (Engineer/Technician/OJT/Others)		
<b>III. License, Rating, Autorisation or Conversion applied for on basis of</b>				
<input type="checkbox"/> A. Knowledge Test Result		1. Knowledge test for license/rating passed		2. Date of completion of knowledge test (dd/mm/yyyy)
<input type="checkbox"/> B. Skill Test Result		1. Skill Test for license/rating passed		2. Date of completion of skill test (dd/mm/yyyy)
<input type="checkbox"/> C. Graduate from integrated course of approved training		1. Name and location of ATO		2. ATO Number
		3. Course from which graduated		4. Date (dd/mm/yyyy)
<input type="checkbox"/> D. Holder of foreign license issued by		1. Country		2. Grade of license
				3. Number 4. Ratings
<b>IV. Applicant's Certification</b>  I hereby declare that all statement in this application are true and correct in every particular I have read and understood the Civil Aviation Regulations requirement relevant to this application. I acknowledge that to knowingly make a false statement is an		A. Signature		B. Date (dd/mm/yyyy)

offence against Part 1 of Nigerian Civil Aviation Regulations.		
<b>VI. Attachments</b> <input type="checkbox"/> Proof of age, date of birth. <input type="checkbox"/> Two recent photographs (2cm by 2.5cm) full face, taken from the same negative. <input type="checkbox"/> Knowledge Test Result <input type="checkbox"/> Skill Test Result <input type="checkbox"/> Notice of Denial (if applicable) <input type="checkbox"/> Letter of Discontinuance (if applicable) <input type="checkbox"/> Graduation Certificate (copy) <input type="checkbox"/> Identification document (copy) <input type="checkbox"/> Verification of authenticity of foreign license <input type="checkbox"/> Evidence of qualification to meet the requirement for Issue, Renewal, Re-issue, Adding rating, Conversion Authorisation or Validation Certificate <input type="checkbox"/> AMEL <input type="checkbox"/> Practical Maintenance Experience <input type="checkbox"/> The appropriate fees	<b>VI. Applicant's identification</b>  Form of ID _____ ID Name _____ Number _____ Date of birth: (dd/mm/yyyy) _____  _____ Expiration date (dd/mm/yyyy) _____ Email address _____  Telephone Number _____	
<b>SLCAA use only</b> <i>I have reviewed this person's application and the required documentation and authorize the issue of the licence/rating/conversion/authorisation</i>  Name/title of CAA official who conducted the review  <u>Date:</u> (dd/mm/yyyy)		