



SIERRA LEONE CIVIL AVIATION AUTHORITY

Application For Validation Of Aircraft Maintenance Engineer Licence

Table with 2 columns: Reference (FORM:AC-PEL021), Revision (01), Date (31st AUGUST 202)

Please complete the form in BLOCKS CAPITALS

SECTION A

PERSONAL DETAILS

Surname:.....

First Name:..... Middle Name:.....

Sex: Male: [] Female: [] Date of birth (day/month/year).....

Nationality: [] [] Place of Birth.....

Permanent Address:.....

Address for correspondence (if different from above):.....

Telephone Number:..... Alternate Telephone number.....

E-mail:.....

Name and Address of Employer:.....

Telephone number:..... Email:.....

Employer's Approval Number:.....

Name and Address of previous employer (If Any):.....

SECTION B

FOREIGN AIRCRAFT MAINTENANCE ENGINEER LICENCE INFORMATION

(a) Licence No..... Date Issued Expiry Date:.....

Airframe engine, Avionics rating/Type ratings on the licence:.....

.....

.....

Country of Issue:..... Issuing Authority:.....

SECTION C

Required ratings to be included in the Validation

State Aircraft with engines type ratings requested for:

.....
.....

SECTION D

COURSE(S) ATTENDED

State all relevant manufacturer's or other system course attended
(copies of certified certificate should be attached)

.....
.....
.....

SECTION E

CERTIFICATION:

This section must be completed by the Quality Manager of the current employer.

I confirm that the details contained in this application are true in every respect.

Name (Block capitals..... Position:.....

Company:..... Company Lic. number:.....

Telephone number:.....

SECTION F

APPLICANT DECLARATION:

I hereby declare that all statements in this application are true and correct in every particular I have read and understood the Civil Aviation Regulation requirement relevant to this application. I acknowledge that to knowingly make a false statement is

Signature:.....

Date:.....

SECTION G

List of all documents Attached

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
- 13.

SECTION H

FOR OFFICIAL USE ONLY:

1. Check that the form is fully completed.....
2. Documents attached checked:.....
3. AME Licence/Certificate attached:.....
4. Required Fees Paid:.....
5. Approved:..... Not Approved.....

