

**This page is not part of the application and is for your information only.
This page has not to be sent to the Belgian CAA.**

Record of versions

Version number	Date of revision	Topics
0.1	01/04/2013	Initial version
1.0	25/04/2017	New layout Update of the requirements "Only once" conformity for the details asked to the applicant

When to use this application form?

In case of applying for the first issuance of an instructor certificate FI, TRI, CRI, IRI, SFI, MCCI, MI, FTI or STI.

Which sections to fill in?

Section 1 – Application – has to be filled in systematically.

Section 2 – Details of the applicant – has to be filled in systematically.

If you wish to inform us about your personal details or about any changes in our personal details, please fill in the "2.2 Applicant details". Otherwise fill in your personal licence number only, in the "2.1 Applicant details".

Section 3 – Address for correspondence – has to be filled in if the address for correspondence is different from your personal address.

Section 4 – Prerequisite flying experience – has to be filled in if you apply for a FI certificate.

The FI certificate requires a minimum flying experience as prerequisites, you have to demonstrate that you meet these minima.

Remark: your logbooks have to be duly filled in, please read the instructions for use included in your Part-FCL logbook or consult the corresponding Acceptable Means of compliance (AMC1 FCL.050) or consult the corresponding information notice on our website.

Section 5 – FI Pre-entry flight test – has to be filled in if you apply for a FI certificate.

This section will be filled in by the instructor who assessed your ability to undertake the FI course.

Section 6 – Prerequisite flying experience – has to be filled in if you apply for a TRI/CRI/IRI/MCCI/SFI/FTI certificate.

As some instructor certificates require a minimum flying experience as prerequisites, you have to demonstrate that you meet these minima.

Remark: your logbooks have to be duly filled in, please read the instructions for use included in your Part-FCL logbook or consult the corresponding Acceptable Means of compliance (AMC1 FCL.050) or consult the corresponding information notice on our website.

Section 7 – STI Prerequisite – has to be filled in if you apply for a STI certificate.

Section 8 – ATO certification and recommendation – has to be filled in systematically.

You have to ask the Approved Training Organisation to fill in the adequate section when the training is completed.

This section will be verified by the examiner BEFORE the skill test.

Section 9 – Confirmation of assessment of competence – has to be filled in systematically.

This section will be filled in by the examiner.

Section 10 – Declaration of applicant – has to be filled in systematically.

Please specify how you wish to receive your licence from BCAA.

Remarks

Within 10 days after receipt of a skill test/proficiency check result, an appealable decision about the test/check results may be requested in writing to the Belgian Civil Aviation Authority.

Any incorrect information could disqualify the applicant from taking any examination or being granted a personnel licence, certificate, rating, authorisation or attestation. Furthermore, in case of obtaining the pilot licence, rating or certificate by falsification of submitted documentary evidence, in spite of the penalties susceptible to be imposed on the pilot, the decision of acceptance will be the object of a decision of immediate withdrawal.

Instruction time must be certified in your logbook by the appropriately rated or authorised instructor from whom it was received.

Assessment of competence, skill test and proficiency check must be certified in your logbook by the appropriately rated or authorised examiner from whom it was taken.

**Application form
Part-FCL Instructor certificates**

Date of reception:

1. Application to be completed by the applicant

I am applying for the following instructor certificate:

FI Flight instructor Aeroplane Helicopter Balloon Airship Sailplane

TRI Type rating instructor Aeroplane (please specify type):

Type rating instructor Helicopter (please specify type):

Type rating instructor Powered-lift (please specify type):

CRI Class rating instructor Single engine Multi engine Single engine and Multi engine

IRI Instrument rating instructor Aeroplane Helicopter Airship

SFI Synthetic flight instructor Aeroplane (please specify type):

Synthetic flight instructor Helicopter (please specify type):

Synthetic flight instructor Powered-lift (please specify type):

MCCI Multi-crew cooperation instructor

MI Mountain rating instructor

FTI Flight test instructor

STI Synthetic training instructor Aeroplane Helicopter

2.1 Applicant details to be completed by the applicant

Belgian licence number: BE.FCL....., A or H or As or S or B

2.2 Applicant details to be completed by the applicant

Belgian national register of natural persons number:

Title: Name: First name(s):

Date of birth (dd/mm/yyyy): Nationality:

Town of birth: Country of birth:

Permanent address:

Town/country: Postcode:

Telephone: Alternative telephone number:

E-mail:

Supporting documentation required with the application:
Copy of your valid passport, EEA/EU national identity card or full EU photographic driving licence

3. Address for correspondence (if different from above) to be completed by the applicant

Postal address:

Town/country: Postcode:

4. Prerequisite Flying Experience (FI only)					
	to be completed by the applicant				
	FI(A)	FI(H)	FI(As)	FI(B)	FI(S)
Total flight time in the corresponding aircraft category					
Total flight time as PIC in the corresponding aircraft category					
Total flight time on single-engine piston aeroplane		N/A	N/A	N/A	N/A
Flight time on single-engine piston aeroplane within the last 6 months prior pre entry flight test		N/A	N/A	N/A	N/A
Total VFR cross country flight time as PIC			N/A	N/A	N/A
Date of 540 km cross country flight with full stop landings at two different aerodromes		N/A	N/A	N/A	N/A
Instrument flight instruction time received	On A/C	On A/C	N/A	N/A	N/A
	On FSTD	On FSTD			
Total number of launches as PIC of Sailplanes	N/A	N/A	N/A	N/A	
Total flight time on relevant class of balloon	N/A	N/A	N/A		N/A
Supporting documentation required with the application:				Original flying logbooks	
CAA use only					

5. FI Pre-entry flight test	
	to be completed by the Flight Instructor who conducted the flight test
I recommend (applicant) for the Flight instructor course.	
Date of satisfactory pre-entry flight test:	
I have checked that the applicant has completed 5 hours on SEP during the 6 months preceding the pre-entry flight test.	
Name of Flight Instructor who conducted flight test:	
Licence N° Competent authority issuing licence:	
Approved training organisation (ATO): ATO approval N°	
Competent authority issuing approval:	
Flight Instructor signature: Date:	

6. Prerequisite Flying experience (TRI/CRI/IRI/MCCI/SFI/FTI)						
to be completed by the applicant						
	TRI	CRI	IRI	MCCI	SFI	FTI
Total flight time in the appropriate category (A, H or PL)			N/A			N/A
Total flight time on multi-pilot aircraft	For TRI(MPA) and TRI(MPH)	N/A	N/A		For SFI(MPA) and SFI(MPH)	N/A
Route sectors / LOFT sessions in preceding 12 months	Route sectors as pilot	N/A	N/A	N/A	Route sectors or LOFT as observer or as pilot	N/A
Total flight time as PIC on single-pilot multi-engine aircraft	For TRI(SPA) and TRI(SPH-ME)	N/A	N/A	N/A	For SFI(SPH-ME)	N/A
Total flight time as PIC on the appropriate type or class	For TRI(SPA)		N/A	N/A	For SFI(SPA) and SP aircraft	N/A
Total flight time in IFR on aircraft	N/A	N/A		N/A	N/A	N/A
Total flight time in IFR in FSTD	N/A	N/A		N/A	N/A	N/A
Total flight test time	N/A	N/A	N/A	N/A	N/A	
Supporting documentation required with the application:						
						Original flying logbooks
CAA use only						

7. Prerequisite (STI)		
to be completed by the applicant		
	STI (A)	STI(H)
Date of the relevant proficiency check on the type or class		
Date of the observation flight in the flight deck	N/A	
Supporting documentation required with the application:		
		Original flying logbooks
CAA use only		

8. Approved course certificate **to be completed by the ATO conducting the training**

I certify that (applicant) has satisfactorily completed an approved course of training in accordance with Part-FCL for the following:

FI TRI CRI IRI SFI MCCI STI FTI MI

Please detail the respective course of training hereunder.

Date course started: Date course completed:

FI Aeroplane Helicopter Balloon Airship Sailplane

TRI Aeroplane (please specify type):

Helicopter (please specify type):

Powered-lift (please specify type):

Training performed in FFS: Yes / No with LIFUS training included: Yes / No

Training performed on aircraft: Yes / No

TRI in the case of introduction of new aircraft (please specify type):

CRI Single engine Yes / No Multi engine Yes / No

IRI Aeroplane Helicopter Airship

SFI Aeroplane (please specify type): in FTD2 or FFS

Helicopter (please specify type): in FTD2/3 or FFS

Powered-lift (please specify type): in FTD2/3 or FFS

MCCI Aeroplane Helicopter in the following simulator: FNPT II/III FTD2/3 FFS

STI Aeroplane Helicopter in the following simulator: FNPT II/III FTD2/3 FFS

MI Aeroplane TMG

FTI Aeroplane Helicopter

The course consisted of hours of theoretical knowledge instruction. If a credit towards the teaching and learning was given please indicate for which previously held instructor certificate:

FI CRI TRI IRI MCCI SFI FTI

The course consisted of hours of flight instruction of which hours in FSTD.

FSTD reference:

Approved training organisation (ATO): ATO approval N°

Competent authority issuing approval:

Name of person having the rights to engage the responsibility of the ATO:

Signature: Date:

Supporting documentation required with the application:
Copy of Part-ORA ATO approval certificate (if ATO is not approved by the Belgian CAA)

CAA use only

9. Confirmation of assessment of competence **to be completed by the examiner**

I certify that (applicant) has satisfactorily completed an assessment of competence on (date): for

FI TRI CRI IRI SFI

Aircraft type and registration: or

FSTD identification number:

I further certify that I have verified that the applicant complies with all the qualification, training and experience requirements for the grant of the certificate for which the assessment of competence is taken.

Name of examiner: Examiner N°

Authorising competent authority:

Signature (examiner): Date:

Supporting documentation required with the application:
Copy of Part-FCL examiner's approval certificate (if examiner is not approved by the Belgian CAA)

Note - Examiners are reminded that they must complete the skill test report form and submit a copy of it to Licensing department, within 14 working days from the skill test.

Applicants are advised that the licence will not be issued until the corresponding skill test report form is received.

10. Declaration of applicant **to be completed by the applicant**

I declare that the information provided by me on this form is correct.

I have fully reviewed all applicable guidance material and have submitted all of the necessary paperwork for my application to be considered.

I wish to pick up my licence from the BCAA during the opening hours.

I wish that BCAA send my licence to my postal address.

Signature (applicant): Date: