

**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	08/03/2018	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 revalidation or renewal of an instructor certificate.

How to use this application form?

Print and fill in the pages intitled "First page" and "Last page" and the in-between page(s) you need for the revalidation or renewal of one or more instructor certificates. The relevant requirements for getting a certificate revalidated or renewed are always gathered on one page. You don't have to print and send us all the pages. Only "First page", "Last page" and the in-between pages for the particular certificates are needed. E.g.: to revalidate your FI(H) certificate, you fill in and send us "First page", "Flight instructor" page and "Last page". To renew your CRI and IRI(A), you send us "First page", "Class rating instructor" page, "Instrument rating instructor" page and "Last page".

Which pages to fill in?

First page (Application – Details of the applicant – Address for correspondence) 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".
- Address for correspondence – has to be filled in if the address for correspondence is different from your personal address.

Any in-between pages you need for the certificates to be revalidated or renewed.

Last page (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 Revalidation / Renewal of instructor certificates

Date of reception:

(BCAA use only)

First page

1. Application to be completed by the applicant

I am applying for revalidation or renewal of 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):

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):

MCCI Multi-crew cooperation 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:

Flight Instructor – Aeroplane/Helicopter/Airship/Sailplane/Balloon

1. Flight instruction time

to be completed by the applicant

	FI(A)/FI(H)/FI(As)	FI(S)	FI(B)
Flight instruction in the appropriate aircraft category	Hours during the period of validity of the certificate	Hours during the period of validity of the certificate	Hours during the period of validity of the certificate
	Hours instruction for an IR within the last 12 months preceding the expiry date of the certificate	Take-offs during the period of validity of the certificate	

Supporting documentation required with the application:

Original flying logbooks

2. Instructor refresher seminar

to be completed by the ATO having conducted the training

I certify that (applicant)

has satisfactorily completed a FI refresher seminar in accordance with Part-FCL. *(Please detail the training hereunder)*

Date course started: Date course completed:

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)

3. Confirmation of assessment of competence

to be completed by the examiner

I certify that (applicant)

has satisfactorily completed an assessment of competence on (date): including in-flight demonstration of the FI FI *, SE/IR *, ME/IR * or ME * privileges *(if applicable and held by the applicant)*
 (* number of boxes marked with a cross

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)

Type Rating Instructor – Aeroplane/Helicopter

1. Flight experience

to be completed by the applicant

	TRI(A)	TRI(H)	For renewing TRI(A)
On each of the types of aircraft for which instructional privileges are held	Date(s) of simulator instruction session(s) of at least 3 hours of a complete type rating course	Hours instruction during the period of validity of the certificate	Sectors on the applicable aeroplane type within the last 12 months preceding the application for renewal of the certificate
	Date(s) of air exercise(s) of at least 1 hour comprising a minimum of 2 take-offs and landings	Hours instruction within the last 12 months preceding the expiry date of the certificate	Sectors in the flight simulator representing the applicable type within the last 12 months preceding the application for renewal of the certificate

Supporting documentation required with the application:

Original flying logbooks

2. Type Rating Instructor refresher seminar

to be completed by the ATO having conducted the training

I certify that (applicant)
has satisfactorily completed a TRI refresher seminar in accordance with Part-FCL. *(Please detail the training hereunder)*

Date course started: Date course completed:

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)

3. Confirmation of assessment of competence or flight instruction session under supervision

to be completed by the examiner or the instructor

I certify that (applicant)
has satisfactorily completed a

assessment of competence *(revalidation of TRI)* or flight instruction session under supervision *(renewal of TRI)*

on (date):

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.

Name of examiner/instructor: Examiner N°

Authorising competent authority:

Signature (examiner/instructor): Date:

Supporting documentation required with the application:

Copy of Part-FCL examiner's approval certificate (if examiner is not approved by the Belgian CAA)

Class Rating Instructor – Aeroplane

1. Flight instruction time

to be completed by the applicant

CRI(A)

Flight instruction in the appropriate aircraft category

Hours instruction on single-engine aeroplanes within the last 12 months preceding the expiry date of the certificate

Hours instruction on multi-engine aeroplanes within the last 12 months preceding the expiry date of the certificate

Supporting documentation required with the application:

Original flying logbooks

2. Class Rating Instructor refresher seminar

to be completed by the ATO having conducted the training

I certify that (applicant)
has satisfactorily completed a CRI refresher seminar in accordance with Part-FCL. *(Please detail the training hereunder)*

Date course started: Date course completed:

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)

3. Confirmation of assessment of competence

to be completed by the examiner

I certify that (applicant)
has satisfactorily completed an assessment of competence on (date): including
in-flight demonstration of the SE * or ME * privileges *(if held by the applicant)*

(* number of boxes marked with a cross

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)

Instrument Rating Instructor – Aeroplane/Helicopter/Airship

1. Flight instruction time

to be completed by the applicant

IRI(A)/IRI(H)/IRI(As)

Hours during the period of validity of the certificate

Flight instruction in the appropriate aircraft category

Hours instruction for an IR within the last 12 months preceding the expiry date of the certificate

Supporting documentation required with the application:

Original flying logbooks

2. Instructor refresher seminar

to be completed by the ATO having conducted the training

I certify that (applicant)
has satisfactorily completed an IRI refresher seminar in accordance with Part-FCL. *(Please detail the training hereunder)*

Date course started: Date course completed:

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)

3. Confirmation of assessment of competence

to be completed by the examiner

I certify that (applicant)
has satisfactorily completed an assessment of competence on (date): including
in-flight demonstration of the SE/IR * or ME/IR * privileges *(if held by the applicant)*

(* number of boxes marked with a cross)

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)

Synthetic Flight Instructor – Aeroplane/Helicopter

1. Flight experience

to be completed by the applicant

On each of the types of aircraft for which instructional privileges are held

Hours during the period of validity of the certificate

Hours instruction within the last 12 months preceding the expiry date of the certificate

Date(s) of the proficiency check(s) for the issue of the specific aircraft type rating(s) representing the type(s) for which privileges are held

Supporting documentation required with the application:

Original flying logbooks

2. Synthetic Flight Instructor refresher seminar

to be completed by the ATO having conducted the training

I certify that (applicant)

has satisfactorily completed an SFI refresher seminar in accordance with Part-FCL. *(Please detail the training hereunder)*

Date course started: Date course completed:

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)

3. Confirmation of assessment of competence

to be completed by the examiner

I certify that (applicant)

has satisfactorily completed a SFI assessment of competence on (date):

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)

Multi-Crew Cooperation Instructor/Synthetic Training Instructor/Flight Test Instructor

1. Flight experience		to be completed by the applicant
STI	FTI	
Hours instruction within the last 12 months preceding the expiry date of the certificate	Hours of Flight Test during the period of validity of the certificate	
Date(s) of the proficiency check(s) in FSTD for the appropriate class or type of aircraft	Hours of Flight Test within the last 12 months preceding the expiry date of the certificate	
.....	Hours of Flight Test flight instruction within the last 12 months preceding the expiry date of the certificate	
Supporting documentation required with the application:		Original flying logbooks

2. Synthetic Training Instructor refresher seminar		to be completed by the ATO conducting the training
I certify that (applicant) has satisfactorily completed a STI refresher seminar in accordance with Part-FCL. (Please detail the training hereunder)		
Date course started: Date course completed:		
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:		
3. FSTD technical training for MCCI renewal		to be completed by the ATO conducting the training
I certify that (applicant) has satisfactorily completed a technical training related to FNPT II/III MCC <input type="checkbox"/> , FTD 2/3 <input type="checkbox"/> or FFS <input type="checkbox"/> . (Please detail the training hereunder)		
Date course started: Date course completed:		
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)

4. Confirmation of instruction session under supervision		to be completed by the instructor
I certify that (applicant) has satisfactorily completed a session under supervision on (date): as MCCI <input type="checkbox"/> , STI <input type="checkbox"/> or FTI <input type="checkbox"/> .		
Aircraft type and registration: or		
FSTD identification number:		
Name of instructor: Instructor N°		
Authorising competent authority:		
Signature (instructor): Date:		
Supporting documentation required with the application:		Copy of Part-FCL examiner's approval certificate (if examiner is not approved by the Belgian CAA)

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 sends my licence to my postal address.

Signature (applicant): Date: