

**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
3.0	08/12/2020	Form in accordance with IR (EU) 2020/358

When to use this application form?

In case of applying for a Sailplane Pilot Licence (SPL) or for an extension for a SPL or for an issuance of a new qualification for a SPL or for a first issuance of Flight instructor sailplane (FI(S)) or for an extension of privileges of the FI(S) 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) describing the training you followed. The relevant requirements for getting a SPL or for launching method(s) or for an additional privileges, ratings and extensions or for an instructor certificate 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 training are needed.

Which pages to fill in?

First page (Application – Details of the applicant – Address for correspondence – Medical fitness) 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.
- You have to provide us with a copy of your medical certificate issued in conformity with Part-MED.
If you are not holding a Belgian issued medical certificate please contact the Belgian Aero-Medical Section at info.ams@mobililit.fgov.be.

Any in-between page(s) you need for the licence or rating you are applying for.

- As some trainings require a minimum flying experience as prerequisites, you have to demonstrate that you meet these minima.
- For the issuance of an SPL, the ATO/DTO must complete the SPL course details and the adequate extension(s).
Remark: your logbooks have to be duly filled in, please read the instructions for use included in your Part-SFCL logbook or consult the corresponding Acceptable Means of compliance (AMC1 SFCL.050) or consult the corresponding information notice on our website.

Last page (Confirmation of skill test – Declaration of applicant) has to be filled in systematically.

- Confirmation of skill test will be filled in by the examiner.
- Please specify in the declaration how you wish to receive your licence from BCAA.

Supporting documentation

1. Copy of your valid passport, EEA/EU national identity card or full EU photographic driving licence (0Y)
2. Copy of Part-MED medical certificate (0Y)
3. Certified copy of theoretical knowledge examination results (if not taken with the Belgian CAA) (5Y)
4. Copy of Part-ORA/ATO/ATO/DTO certificate (if ATO/DTO is not approved by the Belgian CAA) (5Y)
5. Copy of Part-FCL examiner's licence and approval certificate (if examiner is not approved by the Belgian CAA) (5Y)

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.



SAILPLANES - Application form
Part-SFCL Sailplane pilot licence

Date of reception:

First page

1. Application to be completed by the applicant

First issue <i>(tick as applicable)</i>	I hereby apply for the issue of the following: <input type="checkbox"/> Sailplane pilot licence (SPL) with the privilege : <input type="checkbox"/> Sailplanes <input type="checkbox"/> TMGs		
Additional privileges, ratings and extensions: (tick as applicable)	I hereby apply for the additional privileges, ratings and extensions: <input type="checkbox"/> TMG extension <input type="checkbox"/> Sailplanes extension <input type="checkbox"/> TMG night <input type="checkbox"/> Sailplane towing <input type="checkbox"/> Banner towing		
Instructor certificate: (tick as applicable)	I hereby apply for the issue of the following: <input type="checkbox"/> FI(S)	Extension of privileges: (tick as applicable)	I am applying for extension of privileges of my instructor certificate: <input type="checkbox"/> Unrestricted <input type="checkbox"/> Sailplanes <input type="checkbox"/> TMG <input type="checkbox"/> Sailplane towing <input type="checkbox"/> Banner towing <input type="checkbox"/> TMG Night <input type="checkbox"/> FI

2.1 Applicant details to be completed by the applicant

Belgian licence number: BE.SFCL.....

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. Medical fitness to be completed by the applicant

Note: Your medical certificate must be valid on the licence or class extension or additional privileges issue date.

Supporting documentation required with the application: Copy of Part-MED medical certificate

SPL course**Confirmation of theoretical knowledge examination****to be completed by the applicant**I have taken my theoretical examination with the following competent authority:
.....

Supporting documentation required with the application:

Certified copy of theoretical knowledge examination results (if not taken with the Belgian CAA)

SPL course details**to be completed by the training organisation (ATO/DTO)**

I certify that (applicant) has satisfactorily completed a course of training in accordance with Part-SFCL and the approved course curriculum for the grant of a Sailplane Pilot Licence for the privileges for Sailplanes or/and TMGs (*Please fill in the adequate privilege extension(s) on the next page*).

I further certify that I have examined the applicants flying logbook and that the entries in them meet in full the flying experience requirements for the grant of a Sailplane Pilot Licence.

Date course started: Date course completed:

The course consisted of: (refer to point SFCL.130 SPL)

..... Total hours of flight instruction

..... Hours dual flight instruction

..... Supervised solo flight time (including solo cross-country flight time)

..... Date of solo cross-country flight no less than 50 km / 27 Nm; or
..... Date of dual cross-country flight no less than 100 km / 55 Nm

..... Total launches or take-offs and landings

..... Credit for PIC experience in aircraft

(Applicants holding a pilot licence for another category of aircraft, with the exception of balloons, shall be credited with 10 % of their total flight time as PIC on such aircraft up to a maximum of 7 hours.)

Training organisation (ATO/DTO): ATO/DTO approval N°

Competent authority issuing approval:

Name of person having the rights to engage the responsibility of the ATO/DTO:
.....

Signature: Date:

Supporting documentation required with the application:

Copy of Part-ORA or Part-DTO ATO/DTO certificate (if ATO/DTO is not approved by the Belgian CAA)

Extensions of privileges

Extension of privileges to TMG to be completed by the training organisation (ATO/DTO)

I certify that (applicant) has satisfactorily completed additional training for the extension of privileges to TMG:

Date course started: Date course completed:

The course consisted of: (refer to Part-SFCL.130 (a)(2)(v))

..... Total hours of flight instruction in TMGs

..... Hours of dual flight instruction in TMGs

..... Date of solo cross-country flight no less than 150 km / 80 NM in a TMG

Aerodrome of departure Intermediate aerodrome

Training organisation (ATO/DTO): ATO/DTO approval N°

Competent authority issuing approval:

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

.....

Signature: Date:

Supporting documentation required with the application:

Copy of Part-ORA or Part-DTO ATO/DTO certificate (if ATO/DTO is not approved by the Belgian CAA)

Extension of privileges to Sailplanes to be completed by the training organisation (ATO/DTO)

I certify that (applicant) has satisfactorily completed additional training for the extension of privileges to Sailplanes:

Date course started: Date course completed:

The course consisted of: (refer to Part-SFCL.130 (a)(2)(iv))

..... Total hours of flight instruction in Sailplanes

..... Hours dual flight instruction in Sailplanes

..... Date of solo cross-country flight no less than 50 km / 27 Nm; or

Date of dual cross-country flight no less than 100 km / 55 Nm

Training organisation (ATO/DTO): ATO/DTO approval N°

Competent authority issuing approval:

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

.....

Signature: Date:

Supporting documentation required with the application:

Copy of Part-ORA or Part-DTO ATO/DTO certificate (if ATO/DTO is not approved by the Belgian CAA)

Extensions of privileges

Sailplane towing and banner towing – Recency requirements

to be completed by the applicant

Within the preceding 24 months:

..... hours of flight time on TMGs and/or sailplanes

..... hours of flight time on TMGs

..... take-offs and landings on TMGs

..... Date of training flight of at least 1 hour with an instructor FI(S) TMG

OR :

Within the preceding 24 months:

..... Date of proficiency check with an examiner FE(S) TMG

Sailplane towing and banner towing – Flying experience

to be completed by the applicant

..... hours of flight time as PIC on TMGs (after obtaining TMG privileges)

..... take-offs and landings as PIC on TMGs (after obtaining TMG privileges)

Sailplane towing and banner towing

to be completed by the training organisation (ATO/DTO)

I certify that (applicant) has satisfactorily completed a course of training for the Towing rating for:

Banner towing rating

Sailplane towing rating

Date course started: Date course completed:

..... training flights

..... Dual training flights

Training organisation (ATO/DTO): ATO/DTO approval N°

Competent authority issuing approval:

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

Signature: Date:

Supporting documentation required with the application:

Copy of Part-ORA or Part-DTO ATO/DTO certificate (if ATO/DTO is not approved by the Belgian CAA)

Ratings

TMG night rating – Recency requirements

to be completed by the applicant

Within the preceding 24 months:

..... hours of flight time on TMGs and/or sailplanes

..... hours of flight time on TMGs

..... take-offs and landings on TMGs

..... Date of training flight of at least 1 hour with an instructor FI(S) TMG

OR :

Within the preceding 24 months:

..... Date of proficiency check with an examiner FE(S) TMG

TMG night rating

to be completed by the training organisation (ATO/DTO)

I certify that (applicant) has satisfactorily completed a course of training for the TMG night rating.

Date course started: Date course completed:

The course consisted of: (refer to Part-SFCL.210 (b)(2))

..... hours of flight time in TMGs at night

..... hours of dual instruction in TMGs at night

..... Total of solo take-offs and full-stop landings

..... Date of cross-country flight no less than 50 km / 27 Nm

..... hours of cross-country navigation in TMGs at night;

Training organisation (ATO/DTO): ATO/DTO approval N°

Competent authority issuing approval:

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

.....

Signature: Date:

Supporting documentation required with the application:

Copy of the basic instrument flight training certificate
Copy of Part-ORA or Part-DTO ATO/DTO certificate (if ATO/DTO is not approved by the Belgian CAA)

Instructor certificate**Initial FI(S) – Recency requirements****to be completed by the applicant**

Within the preceding 24 months:

..... hours of flight time on sailplanes

..... launches on sailplanes

..... Date of training flight of at least 1 hour with an instructor FI(S)

OR within the preceding 24 months:

..... Date of proficiency check with an examiner FE(S)

Initial FI(S) – Prerequisites Flying Experience**to be completed by the applicant**

..... hours of flight time as PIC on sailplanes

..... launches as PIC on sailplanes

Initial FI(S) – Pre-entry assessment**to be completed by the instructor FI(S) who conducted the flight test**

I recommend (applicant) for the Flight instructor course.

Date of satisfactory pre-entry flight test:

Training organisation (ATO/DTO): ATO/DTO approval N°

Name of Flight Instructor who conducted flight test:

Licence N° Competent authority issuing licence:

Signature: Date:

Supporting documentation required with the application:

Copy of Part-SFCL instructor licence (if instructor is not approved by the Belgian CAA)

Initial FI(S) – Training course**to be completed by the training organisation (ATO/DTO)**

I certify that (applicant) has satisfactorily completed an training course in accordance with Part-SFCL for the Flight Instructor certificate.

Date course started: Date course completed:

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 teaching and learning and;

..... hours of theoretical knowledge instruction and;

..... hours of flight instruction, including take-offs and landings.

Training organisation (ATO/DTO): ATO/DTO approval N°

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

Signature: Date:

Supporting documentation required with the application:

Copy of Part-ORA or Part-DTO ATO/DTO certificate (if ATO/DTO is not approved by the Belgian CAA)

Extension Instructor certificate**Unrestricted FI(S) – Prerequisites Flying Experience** to be completed by the applicant

..... flight time as instructor under supervision on sailplanes
 launches as instructor under supervision on sailplanes
 flight time as instructor under supervision on TMGs
 take-offs and landings as instructor under supervision on TMGs

Extension FI(S) FI – Prerequisites Flying Experience to be completed by the applicant

..... hours of flight time as instructor on sailplanes
 launches as instructor on sailplanes

Extension FI(S) TMG – Recency requirements to be completed by the applicant

..... total hours of flight time on TMGs
 Within the preceding 24 months:
 hours of flight time on TMGs
 take-offs and landings on TMGs
 Date of training flight of at least 1 hour with an instructor FI(S) TMG
 OR :
 Within the preceding 24 months:
 Date of proficiency check with an examiner FE(S) TMG

Extension FI(S) Night – Recency requirements to be completed by the applicant

Within the preceding 90 days:
 take-offs and landings at night on TMGs

Extension FI(S) Sailplane/Banner towing – Recency requirements to be completed by the applicant

Within the preceding 24 months:
 Number of tows

Extension FI(S) TMG - Additional training to be completed by the training organisation (ATO/DTO)

I certify that (applicant)
 has satisfactorily completed a training in accordance with Part-SFCL for FI(S) extension TMG:
 Date course started: Date course completed:
 Training organisation (ATO/DTO): ATO/DTO approval N°
 Name of person having the rights to engage the responsibility of the ATO/DTO:
 Signature: Date:

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

Extension Instructor certificate

Extension FI(S) – Confirmation of instruction session under supervision to be completed by the instructor

I certify that (applicant)

has satisfactorily demonstrated the ability to instruct for *(Please detail the training hereunder)*

TMG Night FI Sailplane towing Banner towing

on (date): Aircraft registration:

Name of instructor: Instructor N°

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

Signature (instructor): Date:

Supporting documentation required with the application:
Copy of Part-SFCL instructor's licence (if instructor is not holding a Belgian licence)

Confirmation of skill test

to be completed by the examiner

I certify that (applicant) has satisfactorily completed a:

SPL skill test

SPL skill test pass date:

Name of examiner: Examiner N°

Authorising competent authority:

Examiner's signature: Date:

Extension of privileges

an extension of privileges to: Sailplanes TMG

skill test pass date:

Name of examiner: Examiner N°

Authorising competent authority:

Examiner's signature: Date:

Confirmation of assessment of competence

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

Registration:

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-SFCL examiner's licence and 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. The licence will not be issued to the applicant until the report form is received.

Declaration of applicant

to be completed by the applicant

I declare that the information provided 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: