## Application for the Revalidation or Renewal of an Instructor Certificate in Accordance with Part-FCL



Please complete this form online (preferred method) then print, sign and submit as instructed. Alternatively, print, then complete in BLOCK CAPITALS using black or dark blue ink.

	This form has two purposes:						
Please read attacl	help the FI(S) collate the evidence need for application to an FIE(S) to get the instructor						
European Commis	certificate revalidated or renewed, and						
administered by th	subsequently, tell the CAA that it has been done.						
If your medical re							
FALSE REPRESI It is an offence representation fo permission or of conviction on ind	When? Revalidation: any time between getting the requirements and the expiry date itself. Experience & seminar anytime AoC only during last 12 months before expiry						
1. APPLICANT DI	Renewal: any time after expiry.						
CAA Personal refer	New expiry date = renewal date + 3 years > end of month						
	Requirements: FCL.940.Fl in the Aircrew Regulation.						
Title:	BGA Advice andyasmiller@gmail.com Sep 2016						
Date of birth (dd/mm/yyyy):							
Town of birth: Country of birth:							
Permanent Address:							
Postcode:							
Telephone:							
E-mail: Fax Number:							
2. ADDRESS FOR CORRESPONDENCE (if different from above)  To be completed by the Applicant							
Postal Address:							
Postcode:							
3. MEDICAL FITN	ESS				To be completed by the Applicant		
Class of Medical C	ertificate held	Date of last Medical					
				BOX 3			
	If Class 2 or higher is held, use these two lines to note expiry dates for LAPL & Class 2 medicals.						
Note: Your medical Certificate must be valid on the licence issue days after the date of application for licence issue, please complete the following							
My medical examination will take place at: on:							
A licence will not be issued to any person unless their medical records supporting their Part-MED medical certificate are held by an Aeromedical Centre located in the United Kingdom. European Commission Regulation (EU) No. 1178/2011 as amended,							

requires that an individual has all of their licences administered by the National Aviation Authority that holds their medical

records (Part-MED.A.030 and Part-FCL.015).

4. PARTICULARS OF	UK OR THIRD CO	UNTRY ICAO LI	CENCES	HELD	То	be completed by the Applicant
Issuing Authority	Type/C	Type/Class of Licence		Lic BO		for FI(S) revalidation or renewal
				BOX 6		
AND REAL POWER OF ARREST		SOAT MO		Part-FCL i	nstructor	s have 'certificates' not 'ratings'
	MARKET TO LOCALIST			Date of re	validatio	n: normally today
5. RATINGS HELD		III Teet /I CT) Lie		Expiry: ne	ew expiry	date – see note on p1
BOX 5 FI(S) revalidation/ rer	ill Test (LST), Licensing ed on your Part-FCL Lic		Examiner details: 'as per BOX12'			
Involve the endorsem and/or class ratings s		Date of I	IR Test			Marketine Company of the Company of
needed.		f Test (if appli	cable)			ded to reflect the instructor's
		BOW	elp edil	uses a co	mpletely	ed on the licence. Sadly, this different set of abbreviations.
54	isvotogA DTA					by, into space available, details after "FCL.905.FI applies as
				in/"		
	THE RESERVE OF THE PARTY OF THE		AND THE OWNER OF THE OWNER OWNER OF THE OWNER OW	Licence	вох 6	Plain English
	nCT			(a)	PPL	Instruction for issue of SPL or LAPL(S)
and graph out of house	6623003	WEST 1995		(b)	-	Instruction for class or type ratings. Included, for some reason, with many FI(S)
		TO BUSE SIE IOS		(f)A	Aerobat	tic
				(f)ST (f)SCFR	Sailplan	e towing
			1 - 1 - 1 - 1 - 1	(i)	FIC	Instructing a pilot to be an instructor
6. INSTRUCTOR CERT		evalidation or ren	ewal of	And TMG	-	Above, as appropriate, in a TMG
privileges previously or			ewai Oi	None of	the other	boxes apply to FI(S)
Instructor Rating held	Date of Revalidation	Expiry Date of	Exa	Example	: "(x)/(y),	/fBZ"
F1(5)	(today)	(see note)	AS	PER BO	× 12	
3(8160)	٠ ١	Will Ollay	omation	Done beng	S Oven Si	sn nodubilsven
	1900 1900 19	CHAIL Dahad		UTC SIVERIO	O source	
PPL C	I'L L IN	IC		MPL		FIC Night
Aerobatic Tow	ring: Glidor	Banner	SP HP	C (A)		
Aircraft only	Simulator only		Aircraf	t and Simu	lator	]

7. APPLICATION (tick as appropriate)	To be completed by the Applicant					
I am applying to revalidate my Flight Instructor Certificate in acc	cordance with Part-FCL:					
FI(A) FI(H) FI(As)	FI(B) FI(S)					
	I am applying to renew my Flight Instructor Certificate in accordance with Part-FCL:					
FI(A) FI(H) FI(As)	FI(B) FI(S)					
I am applying to revalidate the following Type Rating Instructor Certificate in accordance with Part-FCL:						
(Please specify types)						
I am applying to renew the following Type Rating Instructor Certificate in accordance with Part-FCL:						
(Please specify types)						
I am applying to revalidate the following Class Rating Instructor	Certificate in accordance with Part-FCL:					
(Please specify types)						
I am applying to renew the following Class Rating Instructor Cer	rtificate in accordance with Part-FCL:					
(Please specify types)						
I am applying to revalidate the following Instructor Certificate in	accordance with Part-FCL:					
IRI SFI MCCI	STI					
I am applying to renew the following Instructor Certificate in accordance with Part-FCL:						
IRI SFI MCCI	STI					
I require the CAA to reissue my licence with the revalidated Instructor Certificate						
Please note if the CAA are to reissue your licence and revalidate or renew your Instructor Certificate, there is a fee in accordance with the Scheme of Charges and you will need to complete Section 19 of this form.						
8. FLYING EXPERIENCE	To be completed by the Applicant					
FI/	/CRI/IF BOX 8					
Total flight instruction or launches within period of validity (FCL.940.FI), (FCL.940.TRI), (FCL.940.SFI)	Needed only if experience is used to revalidate Only the top left box					
Instrument flight instruction within period of validity	This box does not apply for renewal					
(FCL.940.FI), (FCL.940.IRI)	Charles of the second s					
Flight instruction in 12 months preceding expiry of Certificate (FCL.940.Fl), (FCL.940.TRI), (FCL.940.CRI),						
(FCL.940.SFI), (FCL.940.MCCI), (FCL.940.FTI)						
Total flight tests within period of validity (FCL.940.FTI)						
9. INSTRUCTORS REFRESHER SEMINAR	To be completed by the Seminar Provider					
I certify that (name)	has s BOX 9 continues on next page					
Refresher Seminar for the revalidation or renewal	of an Instructor Certificate in accordance with Part-FCL.					
Date(s) of Seminar:						
Approved Training Organisation (ATO:	ATO Approval No.:					

9. INSTRUCTORS REFRESHER SEMINAR	To be completed by the Seminar Provider				
Competent Authority issuing Approval:	BOX 9 continued				
Name of Head of Training:					
Signature of Head of Training:	If the revalidating FIE(S) has seen a seminar completion				
PLEASE REFER TO FALSE REPRESENTATION S					
10. COURSE COMPLETION CERTIFICATE	(confirmation in Box 12 certifies it)				
BOX 10	ATO Approval No: DTO 0007				
Nothing to do with FI(S) validation or rene	Head of Training: Colin Sword				
The course consisted ofhours of flig in a FNPT I, II/III, FTD 2/3 or FSS.	ht instru Signature should be Seminar Tutor or Leader				
FSTD Identification Number of device used (which must be issued in accordance					
with Commission Regulation (EU) 1178/2011)					
Competent Authority issuing Qualification certificate for the device:					
Approved Training Organisation (ATO:	ATO Approval No.:				
Competent Authority issuing Approval:					
Name of Head of Training (or authorised signatory):					
	A province of control of the province bearing and the control of t				
	Date:				
Signature of Head of Training:	N STATEMENT ON PAGE 1				
PLEASE REFER TO FALSE REPRESENTATIO  11. CONFIRMATION OF ASSESSMENT OF COM-	N STATEMENT ON PAGE 1				
PLEASE REFER TO FALSE REPRESENTATIO  11. CONFIRMATION OF ASSESSMENT OF CON I have successfully completed an Assessment	N STATEMENT ON PAGE 1  MPTENCE To be completed by the Applicant				
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Signature of Head of Training:  PLEASE REFER TO FALSE REPRESENTATIO  11. CONFIRMATION OF ASSESSMENT OF COM I have successfully completed an Assessment of Assessment of Competence Date(s):  Aircraft Type and Registration:  FSTD Identification Number:  Examiner's Name:	N STATEMENT ON PAGE 1  MPTENCE To be completed by the Applicant BOX 11 Needed only if an AoC is used to revalidate or renew.  In addition to this box, the CAA require an Examiner Report SRG1169.				
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13. DECLARATION OF APPLICANT (tick as appropriate)	To be completed by the Applicant				
I declare that the information provided on this form is correct.					
I agree to receive:					
Flight Crew Safety material from the CAA only or Safety Material from authorised sources					
I have fully reviewed all Guidance Notes and have submitted all	of the necessary paperwork for my application to be				
considered.					
Signature:	Date:				
PLEASE REFER TO FALSE REPRESENTATION STATEMENT (	ON PAGE 1				
14. CAA USE ON Guidance Notes 3 & 4 on pages 1 & ii					
Date of Issue The only documents required for FI(S) revalidation/ renewal are this form and (if appropriate)					
Evaminar Papart CDC1160, so no supporting decompartation and a service at					
Checked by	and the certification.				
Loaded by (pages 5,6,7,i & ii omitted to keep this guide	short)				
Signed by					
15. COURIER CHARGES					
BGA RECOMMENDATION FOR SENDING FORM(S)	e customer and CAA issued documents, will be				
SOUTH FOR SENDING FORM(S)	rge as detailed on our website; please click attached vant charge as per the Personnel Licensing Scheme of				
Send a single e-mail to office@gliding.co.uk with .pdf's of:	varit sharge as per the resonant Electioning Scholle of				
- this form &	n, please tick the box below and all documents will be				
- (if AoC involved) SRG1169 Examiner Report	by normal post fail to arrive at your postal address, we is after the original date of despatch from our office. A				
- high quality, ie large, files are best avoided	CAA is not liable for any direct or consequential loss or				
scans at 200 or 300dpi are fine					
The second of th	please tick box.				
- not embedded links, eg Dropbox	tial loss or delay that is caused by the Secure Courier ad in writing to the CAA no later than 24 hours from the				
	ged product(s) to the CAA no later than one week from				
Snail mail with hard copies are more difficult  AoC failures are even more difficult.	The CAA will assist you with your claim from the				
AoC failures are even more difficult.  - contact BGA office for advice					
	Personnel Licensing Scheme of Charges (published in				
Finally,	application are enclosed herewith.				
There should be no fees for revalidation or renewal.	larges have been received.				
Please send comments to andyasmiller@gmail.com					
	enter the name of the person/company who is paying:				
IMPORTANT NOTES:					
<ul> <li>Additional Charges: Where the cost of the CAA investigations exceeds the application charge payable, the applicant shall pay additional charges to recover those excess costs incurred by the CAA in accordance with the</li> </ul>					
Scheme of Charges.					
Overseas Visits: If a Member or employee of the CAA is required to travel overseas in respect of this application you are advised to read the CAA Scheme of Charges to which this application relates and the section entitled					
'Additional charge where functions are performed abroad'. All expenses incurred in pursuance of this application by					
virtue of travelling overseas will be payable by the applicant on demand.  • Withdrawal/Cancellation of Application: In the event that this application is withdrawn by the applicant, a					
cancellation charge may be levied. The cancellation charge reflects the work carried out by the CAA on behalf of the					
applicant up to the point of cancellation. Please see the CAA Refunds Policy at www.caa.co.uk/refunds for more information. Where sufficient funds remain from the original application charge, this charge will be deducted from any					
refund made in respect of the application following cancellation.					