



EASA TRAINING APPLICATION AND ASSESSMENT FORM

EL-ATO-108

FIRST NAME:	MIDDLE NAME:	LAST NAME:
MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>	CPT <input type="checkbox"/> COPI <input type="checkbox"/>	CURRENT EMPLOYER:
DATE OF BIRTH:	PLACE OF BIRTH:	NATIONALITY:
NATIONAL ID OR PASSPORT NBR:	EXPIRY DATE:	ISSUING STATE:

HOME ADDRESS:		
CITY:	POSTAL CODE:	COUNTRY:
TELEPHONE:	EMAIL:	

EASA PART FCL LICENSE			
TYPE:	NUMBER:	ISSUED BY:	
EASA PART FCL MEDICAL			
CLASS:	NUMBER:	ISSUED BY:	EXPIRY DATE:

CURRENT CLASS/TYPE RATINGS HELD IN EASA PART FCL LICENSE			
CLASS/TYPE: EXPIRY:	CLASS/TYPE: EXPIRY:	CLASS/TYPE: EXPIRY:	CLASS/TYPE: EXPIRY:
IR/ME: EXPIRY:	IR/SE: EXPIRY:	PBN PRIVILEGES HELD: <input type="checkbox"/> YES <input type="checkbox"/> NO	OTHER: EXPIRY:

AUTHORIZATIONS AND EXPIRY DATES			

CURRENT CLASS/TYPE RATINGS HELD IN NON-EASA LICENSE			
SPECIFY ISSUING STATE:			
CLASS/TYPE: EXPIRY:	CLASS/TYPE: EXPIRY:	CLASS/TYPE: EXPIRY:	CLASS/TYPE: EXPIRY:
IR/ME: EXPIRY:	IR/SE: EXPIRY:	PBN PRIVILEGES HELD: <input type="checkbox"/> YES <input type="checkbox"/> NO	OTHER: EXPIRY:
EXPIRED CLASS/TYPE RATINGS - EASA AND NON-EASA (PLEASE SPECIFY)			

FLYING EXPERIENCE				
	AIRCRAFT CLASS/TYPE	PIC	COPI	TOTAL
TOTAL FLYING HRS				
CURRENT CLASS/TYPE FLIGHT HRS				
FLIGHT HRS LOGGED DURING LAST 12 MONTHS				

ADDITIONAL COMMENTS	

TRAINING/CHECKING REQUEST	

Attach copies of the:	<input type="checkbox"/> EASA Part FCL License and Medical <input type="checkbox"/> Non-EASA Part FCL (ICAO Annex I compliant) License and Medical (as applicable) <input type="checkbox"/> Passport <input type="checkbox"/> English Language Proficiency (if NOT recorded on the EASA Part FCL License. <input type="checkbox"/> Last 3 pages of Logbook and Last page of the Logbook with an entry relevant to the request
-----------------------	---

I CERTIFY THAT THE INFORMATION ON THIS FORM IS TRUE AND CORRECT <div style="text-align: center;">APPLICANT NAME – SIGNATURE - DATE</div>	THE APPLICANT - DOES / DOES NOT – MEET THE COURSE PREREQUISITES <div style="text-align: center;">HoT – SIGNATURE - DATE</div>
---	--



EASA TRAINING APPLICATION AND ASSESSMENT FORM

EL-ATO-108

ATO PROCESS

TO BE COMPLETED BY THE ATO	
Received by the Administrator on	[Date]
Assessment	
Ground School	
Examiner	
EASA Observed	
<hr/> <i>(HoT/CFI or Deputy's Signature and Date)</i>	