

<b>Details of Personnel as specified in:</b> <i>Please tick applicable box</i>	<input type="checkbox"/> <i>AOCR AOC Eng</i> <input type="checkbox"/> <i>AMO/MRO</i> <input type="checkbox"/> <input type="checkbox"/>	Specific requirement reference ( <i>for example AOCR, Ch 8, Section 4</i> )
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1. Name of Organisation/Operator Name:

2. AMO/MRO Approval Reference/AOC Number (Delete as applicable):

3. Name: 4. CAAT License No.(if held):

5. Position: For AOC : (This form only used for CMR other position used OPS Form 4)

CMR Aircraft Type : .....

For MRO :  Accountable Manager (For repair station locate in Thailand)

Quality Manager     AMO/MRO Manager

NDT Staff (level 3 and level 2) Method : .....

Other please specific .....

6. Qualifications relevant to the Item (5) Position:

7. Name of previous post holder (if any):

Signature ..... Date.....

**CAAT Use only**

Name and signature of Authorised CAAT staff member accepting this nominee:

Signature ..... Date .....

Name ..... Office .....

Remark / Accepted with limitation: .....

*Once authorised, a copy of the completed CAAT Form Four must be returned to the nominee.*