

# APPLICATION FOR NOMINATION FOR APPROVED TRAINING ORGANISATION PERSONNEL "FORM 4"

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.

Please read attached Guidance Notes before completing the technical sections of this form.

#### False Statement

The making of false statement for the purpose of procuring the grant, issue, revalidation, renewal or variation of any certificate, licence, approval, permission or other document is an offence under the Air Navigation Act. The Civil Aviation Authority of Thailand may, in any case in which it thinks it is desirable, require the applicant to furnish such evidence as it may desire and to make and subscribe a statutory declaration as to the truth of the facts set out in the application.

1 .Details of Nominated Personnel required to be accepted			
(In BLOCK CAPITAL)	(To be completed by the Applicant)		
Name of Organisation:	Approval Reference:		
Title : Forename :	Surname :		
Date of birth:	Nationality:		
Town of Birth :	Country of Birth:		
Permanent Address:			
	Postcode:		
Telephone no :	Mobile no :		
Email :			
A certified copy of your valid Passport, National Identity Card or Full Photographic Driving Licence (see Guidance Note 1) must accompany your application as proof of identification			

2 .Address for Correspondence (if different from above)				
	(To be completed by the Applicant)			
Postal Address :				
	Post Code :			
3 .Position, as required per Regulation of ATO	B.E. 2562, being nominated for			
	(To be completed by the Applicant)			
4 .Qualifications relevant to the position				
	(To be completed by the Applicant)			
I have included my CV for reference Ye	es : No:			
5 .Experience relevant to the position				
(include breakdown of instructional hours)	(To be completed by the Applicant)			

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Effective Date: 2-Nov-2020

7 .Declaration of Applicant				
(Тс	be completed by the Applicant)			
I declare that the information provided on this form is true belief. I have fully reviewed all Guidance Notes and have	, -			
paperwork for my application to be considered.				
Signature of Applicant:	Date:			
Delivery Instructions				
This form, when completed, should be forwarded and must	be accompanied by the appropriate			
fee, as applicable to;				
The Civil Aviation Authority of Thailand				
333/105 Lak Si Plaza, Khmapheng Phet 6 Rd., Talat Bang	Khen,			
Lak Si, Bangkok 10210				
Note 1 :CAAT requires a minimum of 2 weeks to process a d	completed application .			
Note 2 :Refer to Thailand Civil Aviation Safety Regulations for charges and fees, as applicable.				

(including name of organisation and dates position held)

(To be completed by the Applicant)

For Official Use Onl	y (CAAT)				
Application		□ Rejected			
Remarks:					
Name and signature of authorized staff member:					
Name:					
Signature:		Dat	te:		

#### GUIDANCE AND SUBMISSION INSTRUCTIONS

#### **GUIDANCE NOTE 1 :Introduction**

- 1. Having a clear form will enable CAAT to process this nomination form more efficiently, with less risk of errors or rejections with subsequent delays to your nomination .
- 2. Please note that failure to submit a correctly completed form with the required supporting documents will lead to the formal rejection of your nomination .In this instance, we will issue you with a 30-day notice to meet the outstanding requirements and failure to meet this deadline will result in your nomination being cancelled and a fee for assessment and refund will be deducted as per our scheme of charges and our refund policy .
- 3. After thoroughly reviewing this guidance and the documents to submit section please send your completed nomination and supporting documentation to the address indicated under Delivery Instructions :

#### GUIDANCE NOTE 2 :Form Completion

## Section 1 Personal Particulars of Applicant

The permanent address is the one that will be used for communications . If you wish our communications to an alternative address, please complete Section 2 the Correspondence Address .

## Section 3 Position being Nominated for

Please enter the position or post holder you are being nominated, as required per ATO BE. 2562.

## Section 4 Qualifications Relevant to the Position

Please include all primary and secondary qualifications gained . Further advanced and University education should also be included . Any professional qualifications, member of associations or other qualifications that you wish to be considered should be included . If you have included your professional CV please tick the box.

## Section 5 Experience Relevant to the Position

Please include all and any work experience that you consider directly applicable to the nominated position being applied for . It is important that you include any and all relevant experience that will support your application for this post.

# Section 6 Other Nominated Form 4 Positions Currently and Previously Held

Please include all previously held post holder positions held .Please declare the dates that the post holder position was held, what position was held and with which organisation . If you currently hold a post holder position within an organisation please declare the date when you commenced the position, what post holder position you hold and the name of the organisation .Please also indicate if you intend to continue to hold this position or relinquish this position if accepted to the new nomination.

## Section 7 Declaration of Applicant

Declaration by applicant, please refer to the false representation statement .

# **Delivery Instructions**

Address details where the application must be sent to.

## Payment Instructions

Explains the methods of payment and transfer details.

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Do not make any entry in this section.