

## Application Form for Conversion of a Flight Instructor Simulator Certificate for Single-Pilot Helicopters to TCAR PEL – Part FCL SFI(H) Certificate for SPA(H)

**SFI(H) SPA(H)** Single-pilot helicopter

Single engine

Multi engine

Ref. of payment

APPLICANT			
First Name	Last Name	Date of Birth	Place of birth
Nationality	Address		City, Country
Telephone	e-mail		

Applicants shall fill in the information above as well as information to support the application to a SFI(H) SPA(H) certificate in the appropriate table below.

Existing Instructor certificate held:

FI S on SPA(H)

TCAR PEL Part FCL instructor certificate applied for:

SFI(H) SPA(H) restricted to training in Single Pilot Operations

To lift restriction to training in SPO

<p><b><u>To obtain TCAR PEL Part FCL SFI(H) certificate on SPA(H) restricted to training in SPO for pilots already holding a TCAR PEL Part FCL licence and:</u></b></p> <p><b><u>a Thai Flight instructor simulator certificate for SPA(H),</u></b></p> <p><b><u>a minimum total flying experience of 500 hours as pilot on helicopter including 100 hours as pilot on SPA(H).</u></b></p>		
Requirements	Compliant (Yes/No)	Evidence
Hold a TCAR PEL Part FCL, CPL (H), ATPL(H) license: Licence number: _____		
Hold a valid Flight instructor simulator certificate on SPA(H) issued by the CAAT Valid until: _____		
Hold a valid SPA(H) TR TR: _____ IR (as applicable): _____ Valid until: _____		
Demonstrate knowledge of TCAR PEL Part FCL regulation Subpart J Pass date: _____		
Pass an assessment of competence in accordance with FCL 935 for the applicable training to be delivered: Pass date: _____		
Minimum total flying experience of 500 hours <b>as pilot</b> on helicopter including 100 hours <b>as pilot</b> on SPA(H) Hours as pilot on helicopter: _____ Hours as pilot on SPA(H): _____		
To lift restriction to training in SPO only: Minimum total flying experience of 350 hours <b>as pilot</b> in multi- pilot operations Hours as Pilot in MPO: _____ <b>Or</b> Minimum flying experience of 100 hours <b>as pilot</b> in multi-pilot operations <b>on the specific helicopter type within the last two</b> <b>years.</b> Hours as Pilot in MPO: _____		

**Note:** Demonstration of knowledge for the relevant parts of the operational requirements and the TCAR PEL Part FCL regulation has been done during licence conversion process

**To obtain TCAR PEL Part FCL SFI (H) certificate on SPA(H) restricted to training in SPO for pilots which have held a national license issued by the CAAT and:**  
**a Thai Flight instructor simulator certificate for SPA(H),**  
**a minimum total flying experience of 500 hours as pilot on helicopter including 100 hours as pilot on SPA(H)**

Requirements	Compliant (Yes/No)	Evidence
Have held a CPL(H), ATPL(H) license issued by the CAAT in accordance with the regulations in force before the entry into force of TCAR PEL FCL/TO and TCAR PEL Parts  Licence number: _____  Date: of issuance: _____		
Hold a valid Flight instructor simulator certificate on SPA(H) issued by the CAAT  Valid until: _____		
Have completed the flight simulator content of the applicable SPA(H) type rating course  TR: _____ Pass Date: _____		
Pass an assessment of competence in accordance with FCL 935 for the applicable training to be delivered:  Pass date: _____		
Minimum total flying experience of 500 hours <b>as pilot</b> on helicopter including 100 hours <b>as pilot</b> on SPA(H)  Hours as pilot on helicopter: _____ Hours as pilot on SPA(H): _____		
Demonstrate knowledge of the relevant parts of the operational requirements and the TCAR PEL Part FCL regulation  Pass Date: _____ In addition, demonstrate knowledge of TCAR PEL Part FCL regulation Subpart J Pass date: _____		
To lift restriction to training in SPO only: Minimum total flying experience of 350 hours <b>as pilot</b> in multi-pilot operations Hours as Pilot in MPO: _____ <b>Or</b> Minimum flying experience of 100 hours <b>as pilot</b> in multi-pilot operations <b>on the specific helicopter type within the last two years.</b> Hours as Pilot in MPO: _____		

**By signing this form, I declare:**

- I know the relevant parts of the operational requirements and the TCAR PEL Part FCL regulation
- I have never possessed any personnel licence, certificate, rating, authorisation, or attestation with the same scope and in the same category which was revoked or suspended.
- that the information provided are correct. I am aware of the consequences of providing false information, such as being denied a license, certificate, rating, authorisation, or having it revoked or cancelled.

Name: \_\_\_\_\_

Date and Place of Signature: \_\_\_\_\_

Signature: \_\_\_\_\_