

Application for Air Traffic Controller (ATCO) Training Organisation Approval

Data protection: Personal data included in this application is processed by CAAT in accordance with Thailand's Personal Data Protection Act (PDPA) B.E. 2562 (2019) on the protection of personal data. It will be processed solely for the purposes of managing, reviewing, and following up on this application, without prejudice to possible transmission to authorized regulatory or auditing authorities if required by law. The Applicant has the right to access their personal data, to rectify any data that is inaccurate or incomplete, and to request the erasure or restriction of processing of their data under applicable provisions of the PDPA. Should the Applicant have any queries concerning the processing of their personal data, they may contact CAAT. The Applicant may also seek recourse by contacting Thailand's Personal Data Protection Committee for further assistance regarding their data protection rights.

1. Your Reference

EMPIC REQUEST Number (REQUEST-xxxxxx)

2. Applicant Address and Contact Data

2.1 Applicant Data

2.1.1 Name and Address

(registered (business) name and address/legal seat of the company)

Organisation Name

Trade Name

Commercial
Register Number

Registered address

No. Building Name:
 Street/Road: Sub-district:
 District: Province:
 Country: Postal code:

2.1.2 Contact Person

(responsible for this application)

Title

☐ Mr ☐ Ms

First Name

Last Name

Job title

Phone

Email

generic email address, if available, e.g. accounting@company.com

2.2 Principle Location (may be left blank, if same as 2.1 Applicant Data)

2.2.1 Name and Location Address

(Company) Name

Address

No. Building Name:
 Street/Road: Sub-district:
 District: Province:
 Country: Postal code:

2.3 Additional Locations

☐ Yes ☐ No

2.3.1 Location Address

(Company) Name

Address

No. Building Name:
 Street/Road: Sub-district:
 District: Province:
 Country: Postal code:

Please duplicate this table (2.3.1) to add further locations.

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2.4 Billing Data (may be left blank, if same as 2.1 Applicant Data)

2.4.1 Billing Address (CAAT Fees and Charges Invoices will state the address entered here.)	(Company) Name	<i>Same as in section 2.1.1 (other name only in exceptional cases)</i>
	Address	No. Building Name: Street/Road: Sub-district: District: Province: Country: Postal code:
2.4.2 Contact Person (responsible for ensuring the CAAT terms of payment are honoured. The electronic invoice will be issued to the email address indicated here.)	Title	☐ Mr ☐ Ms
	First Name	
	Last Name	
	Job title	
	Phone	
	Email	generic email address, if available, e.g. accounting@company.com

2.5 Shipping Data (may be left blank, if same as 2.1 Applicant Data)

2.5.1 Approval Delivery Address (for the shipping of original CAAT documents)	(Company) Name	
	Address	No. Building Name: Street/Road: Sub-district: District: Province: Country: Postal code:
2.5.2 Contact Person (shipping)	Title	☐ Mr ☐ Ms
	First Name	
	Last Name	
	Job title	
	Phone	
	Email	generic email address, if available, e.g. accounting@company.com

3. Identification of Activity

3.1 Activity	3.1.1 ☐ Application for initial ATCO Training Organisation Certificate (<i>go to item 4</i>)
	3.1.2 ☐ Application for amendment/ change ATCO Training Organisation Certificate (<i>go to item 5</i>)
	3.1.3 ☐ Application for renewal ATCO Training Organisation Certificate (<i>go to item 4</i>)
	3.1.4 ☐ Application for replacement ATCO Training Organisation Certificate (<i>go to item 4</i>)
	3.1.5 ☐ Application for re-certification ATCO Training Organisation Certificate (<i>go to item 4</i>)
3.2 Original Approval Ref. please complete in case of 3.1.2, 3.1.3, 3.1.4, 3.1.5	ATCTO-XXXX

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4. Type(s) of Training

for which Certification is requested in accordance with the provision of Regulation RCAAT no. 24, TCAR PEL Part ATCO and Part ATCO.OR

4.1 ☐ ATCO Initial Training

Course	Ratings	Rating endorsements
☐ Basic Training	N/A	N/A
☐ Rating Training	☐ Aerodrome Control Visual (ADV)	N/A
	☐ Aerodrome Control Instrument (ADI)	☐ Tower Control (TWR)
		☐ Ground Movement Control (GMC)
		☐ Ground Movement Surveillance (GMS)
		☐ Air Control (AIR)
		☐ Aerodrome Radar Control (RAD)
	☐ Approach Control Procedural (APP)	N/A
	☐ Approach Control Surveillance (APS)	☐ Precision Approach Radar (PAR)
		☐ Surveillance Radar Approach (SRA)
		☐ Terminal Control (TCL)
	☐ Area Control Procedural (ACP)	N/A
	☐ Area Control Surveillance (ACS)	N/A
☐ Initial Training	☐ Aerodrome Control Visual (ADV)	N/A
	☐ Aerodrome Control Instrument (ADI)	☐ Tower Control (TWR)
		☐ Ground Movement Control (GMC)
		☐ Ground Movement Surveillance (GMS)
		☐ Air Control (AIR)
		☐ Aerodrome Radar Control (RAD)
	☐ Approach Control Procedural (APP)	N/A
	☐ Approach Control Surveillance (APS)	☐ Precision Approach Radar (PAR)
		☐ Surveillance Radar Approach (SRA)
		☐ Terminal Control (TCL)
	☐ Area Control Procedural (ACP)	N/A
	☐ Area Control Surveillance (ACS)	N/A
4.1.1 Remarks		

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4.2 ☐ ATCO Unit Training

4.2.1 Remarks

e.g. 1. Suvarnabhumi Aerodrome Control Rating (ADV - ADI)

4.3 ☐ ATCO Continuation Training

Course

- ☐ ATCO Refresher training
☐ ATCO Conversion training

4.3.1 Remarks

4.4 ☐ ATCO Practical Instructor Training

Course

- ☐ ATCO Practical Instructional Techniques training
☐ ATCO Practical Instructional Techniques Refresher training

4.4.1 Remarks

4.5 ☐ ATCO Assessor Training (Assessor Training/ Assessor Refresher Training)

Course

- ☐ ATCO Assessor training
☐ ATCO Assessor Refresher training

4.5.1 Remarks

4.6 ☐ Other ATCO Training

4.6.1 Remarks

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5. Description of amendment/changes applied for under existing Approval Certificate

5.1 ☐ Amendment/ Changes to the Organisation	[description]
5.2 ☐ Amendment/ Changes to the scope/privileges	[description]
5.3 ☐ Amendment/ Changes to the training courses / training plans / procedures/ training base	[description]

6. Other

6.1 Number of staff involved in the activities under the Type of Training	
6.2 Expected Training Start Date	DD MMM YYYY (05 May 2026)
6.3 List of documentation to be provided with the application a) A copy of company registration b) Certified copy by the Registrar of the shareholder list c) Document or evidence of financial status d) Certified Copy of Document Showing Ownership, Possession, or Right of Use for the Primary Training Facility e) Documents showing the Background and Qualifications of Personnel in the Positions of Head of Training, TKI, and Practical Instructor f) Document detailing the specifications of synthetic training device, as applicable g) Documents showing the facilities and equipment h) 5 years Business plan i) Training and Procedures Manual/ Initial Training Plan / Unit Training Plan / Unit Competence Scheme, as applicable j) Other document as requested (ex. ATCO TO certificate)	

7 Applicant's declaration and acceptance

I declare that I have the legal capacity to submit this application to CAAT and that all information provided in this application form is correct and complete.

I understand that by submitting this application, I am agreeing to the applicable fees or charges as determined by the Civil Aviation Authority of Thailand (CAAT) in accordance with its established fee structure and regulations.

I am aware that all fees or charges, including and relevant travel costs, must be paid regardless of the outcome of the application and understand that these payments may not be refundable. Furthermore, I declare my awareness of the consequences of non-payment.

Date	Name of Accountable Manager	Signature
This application should be submitted via EMPIC system https://service.caat.or.th/webclient/index		

Completion Instructions - Application for Air Traffic Controller (ATCO) Training Organisation Approval

This Application Completion Instruction Sheet will provide you with any additional instructions and requirements necessary to complete the Application for Air Traffic Controller (ATCO) Training Organisation Approval. It is strongly recommended to use the English language in completing the form. Please complete the form in a **clearly legible** way.

# - Field Name	Completion Instructions
1. Your Reference	Please provide an EMPIC REQUEST reference to this application. This reference will be used as an identifier of your application in all communication, e.g. invoice/s, acceptance letter, by CAAT.
2.1.1 Name and Address	Commercial Register number: is a unique identification number assigned to a business or company upon its registration with the relevant government authority responsible for commercial or corporate registration. This number serves as proof of the company's legal status and is used for official purposes such as tax filings, regulatory compliance, and verifying the company's existence. Please enter the full name of the company as it appears on the Business Registration or similar legal document stating name and seat of the company. If applicable also enter the Trade Name, Doing-business-as and the Company registration number. Please enter the address of the registered office as it appears on the Business Registration or similar legal document. First time applicants need to submit a copy of the company's Business Registration or similar legal document stating name and seat of the company together with the application. If applicable, an additional translation of this document (done by an authorised translator, signed and stamped) should be submitted.
2.1.2 Contact Person	The name and contact details specified in this section are those of the person responsible for the application.
2.2.1 Principle Location Address	The (company) name and address of the principal location. The name and address detailed specified in this section will be printed onto the CAAT certificate.
2.3 Additional Locations	The address of any additional location. In case of several locations, you may duplicate table to add further locations.
2.4.1 Billing Address	The (company) name and address specified in this section will be printed on the invoice/s CAAT will issue. A (company) name deviating from the one entered in section 2.1.1 can only be accepted by CAAT upon justified request. A written statement, signed and stamped, from the legal entity which is taking responsibility to pay the CAAT invoice(s) is to be submitted together with the application.
2.4.2 Contact Person	The name and contact details specified in this section are those of the person who will be contacted for all issue related to the CAAT invoice/s. (e.g. accounts payable clerk). Responsible for ensuring the CAAT terms of payment are honoured. An electronic invoice will be issued to the email address indicated here.
2.5.1 Shipping Address	The (company) name and address specified in this section is where CAAT will send the original certificate/approval.
2.5.2 Contact Person	The contact person of this section is the person the original certificate/approval will be sent to.
3.1 Activity	Tick the appropriate box to indicate whether this is an application for initial approval or change to existing approval or renewal or replacement or re-certification.
3.2 Original Approval Ref.	Indicate the reference of the existing Approval Certificate (e.g. CAAT approval number)
4. Type of Training	a) Tick the types of Training and Rating and Rating endorsement as they appear to describe the scope of services for which certification can be requested/granted b) Any additional information to support the application can be indicated under 'Remarks'
5. Description of changes applied for under existing Approval Certificate	Please provide a short summary of the changes applied for (ref. section 3.1)
6.1 Number of staff	The information to be entered here must reflect the number of staff, or in case of an initial approval the intended number of staff, for the complete activities to be covered by the approval and therefore must include also any associated administrative staff. Staff not working full time should be counted, with appropriate ratio.

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6.2 Expected training start date	Please provide estimate date that expected to conduct the class
6.3 List of documentation to be provided with the application	Please provide the requested documentation together with this application form