Application Form for IRI(A) initial application

Ref. of payment

APPLICANT			
First Name	Last Name	Date of Birth	
Nationality	Personal address		City, Country
Telephone	e-mail		
Type of licence	Licence number		Valid until

Invoice and certificate to be sent to ☐ company ☐ applicant

Summary of requirements for the issue of an IRI(A) or for the FI(A) extension to instruct IR

Pilot licence ☐ PPL ☐ CPL ☐ ATPL SP CR/TR Except HPAC:_____rating valid until:_____

Additional prerequisite to apply for IRI (A) or FI (A) extension to instruct IR on Multi Engine Aeroplane
Comply with FCL.915.CRI (a), FCL.930.CRI and FCL.935
Can be demonstrated when applicant hold a valid:
☐ FI(A) extension ME
☐ CRI (A) ME

☐ For holders of a valid FI(A) extension to instruct IR:

1) completed at least 200 Hours of flight time under IFR hours:_____
of which up to 50 Hours may be instrument ground time in a FNPT II, FFS, FTD 2 or 3 hours:_____

2) Completed an approved IRI(A) course at an ATO.
10 hours of technical training
hours: _____

at least 5 Hours flight instruction on an aeroplane, FNPT II, FFS, FTD 2 or 3 hours: _____

☐ Enclose copy of course confirmation

☐ **Issue of IRI (A):**

1) completed at least 800 Hours of flight time under IFR hours: _____
of which at least 400 Hours on aeroplanes hours: _____

1) **Teaching and learning course** completed (FCL 930.FI (b) (1)). date: _____

☐ **Enclose copy of course confirmation**

3) Completed an approved IRI(A) course at an ATO, date: _____
10 hours of technical training hours: _____
at least 10 Hours flight instruction on an aeroplane, FNPT II, FFS, FTD 2 or 3 hours: _____

☐ **Enclose copy of course confirmation**

A copy of the last logbook pages (flight experience & STD pages) shall be attached to this application.

Data confirmed by ATO

ATO name: _____ Registration no: _____

Name of Head of Training: _____ Licence no: _____

Location & date: _____ Signature of Head of Training: _____

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licence, certificate, rating, authorisation, or attestation with the same scope and in the same category which was revoked or suspended.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: _____

For CAAT use ONLY

Name of Examiner_____Signature _____ Date: _____

Completed an Assessment of Competence as

IRI(A)_____Date: _____

☐ **Enclose Examination Form**