Part I : Applicant's Information

Name of Organisation:	ATO certificate no.: *FTO-XXXX or ATCO-XXXX or MTO-XXXX*	
Title of proposed Training Program: *Course title issues XX revision XX*	Date of Submitted: *DD – MMM - YY* Proposed Course Start Date: *DD – MMM - YY*	Application No.: *(For CAAT)*

Prior Approval	Type of Submission ☐ Initial ☐ Amendment No. of Attempt ☐ 1st attempt ☐ 2nd attempt ☐ 3rd attempt	Type of Program ☐ Initial Training ☐ Recurrent ☐ LPC ☐ Other (specify)................................	How the training is to be delivered ☐ Classroom Delivery ☐ Virtual Classroom ☐ Flight Training ☐ Simulator Training ☐ Other (specify)................................ Training device will be used for this course (Type and number) ☐ Simulator (FSTD/STD)................................ ☐ Actual aircraft................................

Coordinator Name/ contact: *1. Mr. XXX YYYY/ email*

The following documents are submitted by the applicant along with this checklist:

☐ 1. Intention letter on the applicant's company letterhead specifying the title of the training programme

☐ 2. Checklist for Training Manual Approval (If applicable)

☐ 3. Draft of Manual

☐ 4. Reference materials for the training/Other relevant documents as required by competent officials................................

Please ensure that

- There is a list of effective pages. Every page is identified with a page number, a date and a revision number.
- Training materials and Examination Tests, in any format, shall be made accessible for CAAT inspector
- Reference in the applicable Training Program should be detail appropriate with training materials
- Organisation declaration and signature in the first page must be signed

Declaration and Signature

the information provided in this form is complete and correct and that the documents provided are genuine.

Signature: Applicant Name: Date:

Part II	Competent Official Use Only		
Check Submitted document			
1st checked ☐ Complete date……………… ☐ Incomplete date……………… Signature/Name:	2nd checked ☐ Complete date……………… ☐ Incomplete date……………… Signature/Name:	3rd checked ☐ Complete date……………… ☐ Incomplete date……………… Signature/Name:	Financial (If applicable) ☐ Invoice No.……………… Date:……………… ☐ Receipt No.……………… Date:………………
Verification result: ☐ Accept ☐ Reject			
This compliance check form has been verified by: **Signature:** **Name:** **Date:** **(If applicable) Under supervision of:** **Signature:** **Name:** **Date:**			

Instructions:

1) ATO is to conduct a self-assessment as part of its compliance check by providing manual references into the 'Compliance checked by ATO'.
2) Failure to complete this form may result in a delay in approval processing. After 3rd rejected, applicant shall start the new process from the beginning with the new intention letter.
3) Each check list item shall be assessed and given a result either 'Satisfactory - (S)', 'Unsatisfactory - (U)' or 'Not applicable - N/A'
    a. 'Satisfactory' or 'S' refers to satisfactory level. It shall be given if the applicant is able to provide or demonstrate adequate of CAAT regulatory compliant evidence, reliable records of implementation and demonstrate a sound knowledge if interview of relevant personnel are performed. Also, all sub-items must be satisfied.
    b. 'Unsatisfactory' or 'U' refers to unsatisfactory level. It shall be given if any actions found not to be in compliance with CAAT rules and regulations or not to be conformed to any applicant 's documentation as well as any actions being done without evidence of records.
    c. 'N/A' shall be given when information in a certain table cell is not provided, because it does not apply to a particular case in question.
4) Remarks column, inspection result information shall be recorded, both satisfactory or unsatisfactory, the information shall be detailed enough to support the inspection result.
5) Signature block: the following shall be filled.
    a. Name & surname, in capital letters
    b. Signature
    c. Signed date in DD Month (e.g. JAN) and year (in C.E.)
6) Provide detail in each subtopic/content of every subjects.

7) Checklist does not address Training Manual requirements as per TCAR PEL Part ORA. Applicant shall provide separate Training Manual checklist for review and approval along with this checklist. (If Applicable)

Note: All fields/items shall be completed. In fields/items for which there is no answer or is not used, mark a horizontal straight line or enter "N/A" or shaded with a reason.

The requirements of Notification of the Civil Aviation Authority of Thailand on the Certification of Aviation Training Organization and Courses B.E.2562								
No	Requirements	Compliance Checked by Applicant			CAAT Officials Use Only			
		Yes	No	Manual Reference *(Section/Chapter/Page/Topic No.)*	S	U	N/A	Remarks
1	Course Title, Course Objective and Course Expectation							
2	Person responsible for the course							
3	Instructor qualifications							
4	Trainees' entry qualification							
5	Training course outline (structure of theoretical and practical training)							
6	Course contents (subjects, topics and learning hours)							
7	Course timetable, duration, and limitation							
8	Syllabus, lesson plan and course management/development							
9	Training methods, training materials, documents, and equipment							
10	Measurement and assessment							
11	Instructor names list with qualification, education, and experiences							
12	Examiner name list with qualification, education, and experiences (If applicable)							
13	Details of training equipment and facilities i.e. location, airports, routes,							

	Classrooms, Briefing-area,							
14	Aircraft, FSTD, maintenance and relevant equipment/material							
15	Total training program			Program(s)				

No	Training Activities	Training Hour(s)	Manual Reference *(Chapter, Page, Topic no.)*	CAAT Officials Use Only			
				S	U	N/A	Remarks
1.) Training Program Name: *Ex. Recurrent Experience lapsed more than 90 days, etc.*							
Course/Program Objective:							
1.1 Theoretical Knowledge Training or Long Briefing (If applicable)							
1	*Ex. Aircraft System and Performance*						
2	*Ex. Normal, Abnormal and Emergency Procedures*						
3	*Ex. Flight planning, Weather, NOTAM, CRM and TEM*						
	Total		Hours				
1.2 Flight Training							
1	*Ex. Familiarisation/Normal Operation*						
2	*Ex. General Handling/Airwork*						
3	*Ex. 3 Take-off/Landing*						
4	*Ex. Normal, Abnormal and Emergency Procedure*						
5	*Ex. Familiarisation/Normal Operation*						
	Total		Hours				
1.3 Assessment (If Applicable)							

No	Training Activities	Training Hour(s)	Manual Reference *(Chapter, Page, Topic no.)*	CAAT Officials Use Only			
				S	U	N/A	Remarks
1	*Ex. Assessment by Examiner*						
	Total		Hours				

Remark: Additional rows can be added by the applicant as needed to accommodate all relevant content

No	Training Activities	Training Hour(s)	Manual Reference *(Chapter, Page, Topic no.)*	CAAT Officials Use Only			
				S	U	N/A	Remarks
2.) Training Program Name: *Ex. Instrument experience lapsed more than 180 days, etc*.							
Course/Program Objective:							
2.1 Theoretical Knowledge Training or Long Briefing (If applicable)							
1	*Ex. Air laws and Aircraft General concerning for IFR*						
2	*Ex. Aircraft Performance and Flight Planning for IFR*						
3	*Ex. Human factor for Instrument flying and TEM*						
4	*Ex. Meteorology and IFR Operations procedures*						
5	*Ex. Instrument Navigation (Nav aids ident and use, SID-STAR & Approaches)*						
	Total		Hours				
2.2 Flight Training							
1	*Ex. IFR flight with instructor*						
2	*Ex. 3 hours of Instrument flying*						
3	*Ex. 3 Instrument approaches*						

No	Training Activities	Training Hour(s)	Manual Reference *(Chapter, Page, Topic no.)*	CAAT Officials Use Only			
				S	U	N/A	Remarks
	Total		Hours				
1.3 Assessment (If Applicable)							
1	*Ex. Assessment by Examiner*						
	Total		Hours				

Remark: Additional rows can be added by the applicant as needed to accommodate all relevant content

No	Training Activities	Training Hour(s)	Manual Reference *(Chapter, Page, Topic no.)*	CAAT Officials Use Only			
				S	U	N/A	Remarks
3.) Training Program Name:							
Course/Program Objective:							
3.1 Theoretical Knowledge Training or Long Briefing (If applicable)							
	Total		Hours				
3.2 Flight Training							
	Total		Hours				
1.3 Assessment (If Applicable)							
	Total		Hours				

Remark: Additional rows can be added by the applicant as needed to accommodate all relevant content

No	Training Activities	Training Hour(s)	Manual Reference *(Chapter, Page, Topic no.)*	CAAT Officials Use Only			
				S	U	N/A	Remarks
4.) Training Program Name:							
Course/Program Objective:							
4.1 Theoretical Knowledge Training or Long Briefing (If applicable)							
	Total		Hours				
4.2 Flight Training							
	Total		Hours				
1.3 Assessment (If Applicable)							
	Total		Hours				

Remark: Additional rows can be added by the applicant as needed to accommodate all relevant content

No	Training Activities	Training Hour(s)	Manual Reference *(Chapter, Page, Topic no.)*	CAAT Officials Use Only			
				S	U	N/A	Remarks
5.) Training Program Name:							
Course/Program Objective:							
5.1 Theoretical Knowledge Training or Long Briefing (If applicable)							
	Total		Hours				
5.2 Flight Training							
	Total		Hours				
1.3 Assessment (If Applicable)							
	Total		Hours				

Remarks: Additional rows can be added by the applicant as needed to accommodate all relevant content

In case applicants have more courses than the number of tables provided in the checklist, additional tables can be added accordingly

References : Regulation of the Civil Aviation Authority of Thailand Relating to the Certification of Aviation Training Organization and Courses
: Regulation of Civil Aviation Authority of Thailand Relating to Licence issuance and endorsement
: Regulation of the Civil Aviation Authority of Thailand Relating to Licence Privilege