



# APPLICATION FOR ORIGINAL PEL LICENSE [OTHER THAN FLIGHT CREWMEMBERS]

## INSTRUCTIONS

Print or type. Do not write in areas with shaded titles. These are for CAAV use only. Submit original only to the Flight Safety Standards Department or a CAAV Authorized Person. If additional space is required, use an attachment

A. APPLICATION IS HEREBY MADE FOR	ISSUANCE	REISSUANCE OF THE FOLLOWING VIETNAM PEL LICENSE:
1 FLIGHT DISPATCHER	4 AIRCRAFT MAINTENANCE TECHNICAN	7 AVIATION REPAIR SPECIALIST
2 CABIN CREW MEMBER	5 INSPECTION AUTHORIZATION	8 AERONAUTICAL RADIO OPERATOR
3 GROUND INSTRUCTOR	6 PARACHUTE RIGGER	9 AIR TRAFFIC CONTROLLER

B. THE FOLLOWING RATING IS INVOLVED:	
1. BASIC RATINGS	2. SPECIALIZED.... ..(SPECIFY CLASS)→ .....
	3. TYPE RATING..... ..(SPECIFY)→ .....

C. AIRMAN PERSONAL INFORMATION:										
1. NAME (Last, First, Middle)					2. PERMANENT ADDRESS (Street or PO Box Number)					
3. TELEPHONE AND FAX					4. CITY		ISLAND/STATE/PROVINCE		MAIL CODE	COUNTRY
5. DATE OF BIRTH (MONTH, DAY, YEAR)			6. PLACE OF BIRTH			7. NATIONALITY (CITIZENSHIP)		8. Language Proficiency Level 4/+?		Yes No
9. HEIGHT	10. WEIGHT	11. HAIR	12. EYES	13. SEX	14. E-MAIL ADDRESS				15. CAAV PEL NUMBER	

D. CURRENT AIRMAN LICENSE INFORMATION			
1. LICENSE NUMBER	2. STATE OF ISSUE	3. DATE ISSUED	4. RATING(S)

<b>E. LICENSE OR RATING APPLIED FOR ON BASIS OF COMPLETION OF:</b>	1. EXPERIENCE	2. WRITTEN TEST	3. PRACTICAL TEST
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<b>F. HAVE YOU FAILED A TEST FOR THIS LICENSE OR RATING?</b>	1. Yes	2. No
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G. APPLICANT'S CERTIFICATION— I certify that all statements and answers provided by me on this application form are complete and true to the best of my knowledge and I agree that they are to be considered as part of the basis for issuance of any PEL license to me.		
<i>A person shall not with intent to deceive: (c) make any false representation for the purpose of procuring for himself or any other person the grant, issue, renewal or variation of any such license...</i>	1. DATE	2. APPLICANT SIGNATURE:

H. DESIGNATED EXAMINER'S OR AIRMAN CERTIFICATION REPRESENTATIVE REPORT			
1. I have personally reviewed this applicant's experience and/or training records, and certify that the individual meets the pertinent requirements of VAR Part 7 for the license or rating sought.			
2. I have personally tested this applicant's knowledge and/or language proficiency.			
3. I have personally conducted the practical test of this applicant in accordance with pertinent procedures and standards with the results indicated below.			
4. Approved – License Issued		6. Location of Test	7. Duration
5. Disapproved – Disapproval Notice Issued			
8. License or Rating for Which Tested		9. Date	10. Examiner's Signature (Sign)
11. License No.	12. Designation No.	13. Designation Expires	14. Examiner's Name (Print Name)

I. ATTACH APPLICANT PHOTO HERE (Passport Size)

J. ATTACHMENTS:			
1. Language Proficiency Report	6. Airman's Identification (ID)		
2. Knowledge Test Report	7. _____	11. _____ Name	
3. Practical Test Report	8. _____	12. _____ Date of Birth	
4. Notice of Disapproval	9. _____	13. _____ License Number	
5. Superseded Airman Certificate	10. _____	14. _____ E-Mail Address	

K. CAAV AUTHORIZED PERSON CERTIFICATION:			
1. THE LICENSE(S) WAS ISSUED I/A/W PART 7 AND CAAV REQUIREMENTS:		2. THE LICENSE WAS NOT ISSUED	
3. DATE	4. TITLE OR DESIGNATION NUMBER	5. SIGNATURE	6. CASORT-PEL Entry: