

Examiner's acceptance authorization is valid for 24 calendar months

A. FOR Foreign Training Center USE ONLY

| 1. Training Center Det | ails | | | | | |
|---|--|--|----------------|-----------|-------------------|-----------|
| Training Center Name | | | | | | |
| Address | | | | | | |
| Aircraft Category | ☐ Aircraft ☐ Helicopter | | | | | |
| Aircraft Type Rating | | | | | | |
| Aircraft Variant | | | | | | |
| Training Post Holder (Head of Training) Contact Details | Name | | E-Mail | | | Phone No. |
| | | | | | | |
| 2. Application Details | | | | | | |
| | application for Evaluator/Examiner/Synthetic Flight xaminer/Type Rating Examiner acceptance/ Authorization | | | ☐ Issuanc | ce | ☐ Renewal |
| Aircraft type details | | Aircraft variant details | | | | |
| | | | | | | |
| 3. Evaluator/Examiner | Details | | | | | |
| Applicant Name | | | | | | |
| Date of Birth (dd/mm/yy) | J | Place of | Place of Birth | | | |
| License Type | | Nationality | | | | |
| License Number | | State of license issue | | | | |
| License Expiry Date (if applicable) (dd/mm/yy) | 1 | Aircraft type & variant | | | | |
| Type Rating Expiry date (dd/mm/yy) | | Instructor rating expiry date (dd/mm/yy) | | | | |
| I hereby declare that the information given in this form is true & correct. | | | | Ap | plicant Signature | |



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B. Synthetic Flight Examiner Authorization Issuance Pre-Requisites Requirements.

| Evaluator/Examiner Acceptance/Authorization Issuance Requirements | | | | | | |
|---|--|-----|----|--|--|--|
| No | GACA PART 142 Requirements | YES | NO | | | |
| a | Hold or has held Pilot License issued by ICAO Contracting State (Competent Authority) at least CPL (A), or ATPL (A) for ATPL check/test | | | | | |
| b | holds at least an equivalent license, rating, or certificate on the subject he is authorized to check; | | | | | |
| c | Hold valid Instructor Rating (Synthetic flight instructor rating/Type rating Instructor rating approval/authorization/certificate which is approved by the Competent Authority (ICAO Contracting State) | | | | | |
| d | Hold valid type rating on the applicable aircraft (Airplane or Helicopter) type for Check/Skill tests. | | | | | |
| e | Complies with the requirements established in GACAR-142 for the issuance of the relevant Evaluator/Examiner certificate/authorization, or at least with ICAO Annex 1 requirements; and | | | | | |
| f | demonstrates to GACA an adequate level of knowledge of the applicable GACA rules and regulations to be able to exercise Evaluator/Examiner privileges in accordance with GACA requirements | | | | | |
| g | Shall complete the initial and recurrent training requirements in accordance with ICAO Contracting State (Competent Authority) or at least Annex 1 | | | | | |
| h | Completed Training Center Evaluator/Examiner Initial acceptance requirements, training, awareness about the applicable administrative procedures, contents of Training and Procedures Manual(s) Quality System as well as related documents, forms and records in accordance with Training Center and Procedures Operations Manual | | | | | |
| i | Completed Examiner standardization arrangements with GACA ASI or the Designated Examiner | | | | | |
| j | Pass Examiner/Evaluator acceptance/Authorization evaluation (briefing, conducting Check/test, assessment, de-briefing & recording /documentation) by GACA ASI or Designated Examiner | | | | | |

| C. | C. Evaluator/Examiner Acceptance Authorization Renewal Requirements | | | | | |
|----|--|-----|----|--|--|--|
| No | GACA Requirements | YES | NO | | | |
| a | Applicant must meet the prescribed GACA requirements in table (5) in this application form. | | | | | |
| b | The applicant must have conducted at least 2 Checks/tests or proficiency Date checks every year during the validity period of the authorization, | | | | | |
| С | One of the checks/tests or proficiency checks given by the examiner within Date the validity period of the authorization must have been observed by GACA ASI or the Designated Examiner/Evaluator. | | | | | |



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| D. Training Post Holde | er Compliance statement an | d Recommendation. | | |
|---|---|---|--|--|
| Contracting State Comp Type Rating, for exerci | sing the privileges of Exami niner recurrent training, check | ner at Training Center. ing and standardization in |) on () Aircraft The applicant meets the | |
| | ame | Signature | Date | |
| | | | | |
| E. FOR GACA USE O | NLY | | 1 | |
| 1. Examiner/Evaluat | or Designation | | | |
| <u> </u> | al Manager Flight Operations or) to conduct the Examiner/E | • | • | |
| - | SI Name | Signature | Date | |
| | | _ | | |
| | | | 1 | |
| 2. Examiner Recomm | endation. (Examiner notified | by GACA) | | |
| Date | | Take off time | | |
| Training Center Name | | Landing time | | |
| FSTD Type & number | Total flight time | | | |
| Departure | ☐ Examiner Acceptance Test ☐ Passed ☐ Fail | | | |
| Destination | ☐ Renewal Observed Evaluation ☐ Passed ☐ Fail | | | |
| Examiner | | | | |
| recommendations | | | | |
| Exam | iner Name | Signature | Date | |



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| 3. GACA Recommendation | | | | | | |
|---|-------------------|-------------------|--------------|------------|--|--|
| Evaluator/Examiner authorization | n 🗆 Issuance | ☐ Issuance ☐ | | ☐ Renewal | | |
| Evaluator/Examiner Acceptance | ☐ Approved | ☐ Approved | | ☐ Rejected | | |
| authorization issuance status Evaluator/Examiner privileges for | | | ☐ Helicopter | | | |
| Evaluator/Examiner privileges: | | | <u> </u> | | | |
| Examiner/Evaluator restrictions and/or limitations, if applicable | | | | | | |
| Exam | niner/Evaluator A | cceptance Auth | orization | | | |
| Issuance date (dd/mm/yy) | | Expiry date (date | d/mm/yy) | | | |
| Remarks | Remarks | | | | | |
| | | | | | | |
| Air Safety Inspector Name | | Signa | ture | Date | | |
| | | | | | | |



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F. SUPPORTING DOCUMENTS.

- Cover Letter from Foreign Training Center, if required, for Examiner/Evaluator acceptance authorization issue/renewal examiner designation
- This application forms
- Copy of Examiner approval/acceptance authorization (Competent Authority ICAO Contracting State)
- Copy of applicant pilot License (CPL/ATPL)
- Copy of related log book pages or any other equivalent evidence, if required
- Copy of valid Examiner Type Rating Proficiency check for the Aircraft type rating(s) that is intended to be checked
- Copy of the expired or previous Examiner/Evaluator Acceptance authorization (GACA designation) (for renewal only)
- After conducting of Examiner authorization acceptance evaluation/examiner renewal observation evaluation:
- Examiner authorization acceptance evaluation report/Examiner renewal observation evaluation report