

## SAFETY MANAGER ACCEPTANCE APPLICATION FORM

### A. FOR APPLICANT USE

1.	<b>Organization &amp; Applicant Details</b>	
a.	<b>Organization Name</b>	
b.	<b>Organization Address</b>	
c.	<b>Nominated Safety Manager Name</b>	
d.	<b>Email address</b>	
e.	<b>Contact Number</b>	
2.	<b>Qualifications</b>	
3.	<b>Work Experience</b>	
4.	<b>Training Relevant to Quality System</b>	

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A. FOR APPLICANT USE		COMPLIANCE	
		YES	NO
5.	<b>Minimum Qualifications and Experience for the Safety Manager Position:</b>		
a.	Hold or have held an Airline Transport Pilot License (ATPL) for Air Operators and Pilots training organizations, or		
b.	Aviation Maintenance Engineer Certificate/Airframe & Power plant License/Certificate for repair stations (Approved Maintenance Organizations) or aircraft manufacturers;		
c.	At least 3 years' experience and expertise in the aviation Safety Management System (implementation and improvement) of which one (1) year managerial experience (manager or supervisor);		
d.	Operational experience related to the service provided by the certificate holder;		
e.	At least five years' experience in aviation industry of which two years in the related field (e.g., Air Operators, Training Organization, etc.)		
f.	Technical background to understand the systems that support the Certificate holder's operations;		
g.	Experience and qualifications in conducting safety/quality audits and inspections		
h.	Experience in Aircraft Accident Investigation		
i.	Quality Management System experience is highly recommended;		
j.	Understanding of human factors principles;		
k.	Analytical and problem-solving skills, including hazard analysis, risk assessment, and the ability to evaluate the effectiveness of implemented mitigations		
l.	Communication skills;		
m.	Project management skills, including planning, organizing, and implementing;		
n.	Applicant is not a part of any other system of the concerned Organization.		
o.	Retains a clean record devoid of any instances of unethical conduct or violation of laws, regulations, or policies;		
p.	Have not had their post-holder approvals revoked in prior experiences due to their subpar performance or repeated nonconformance;		
q.	To pass a KSA security clearance;		

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		YES	NO
<b>6.</b>	<b>The Applicant has at least completed the following Training:</b>		
a.	Safety Management System		
b.	Safety Risk Management		
c.	Emergency Response Plan/Crisis Management		
d.	Quality Management System		
e.	Audit Techniques		
f.	Human Factors		
g.	Accident Investigation		

<b>7.</b>	<b>Declaration By the Nominated Safety Manager</b>		
I hereby declare that the information given in this form is true, correct & complete.			
Name		Signature	Date

<b>8.</b>	<b>Organization Accountable Manager Declaration</b>		
I hereby certify that the applicant meets GACAR 5, eBook V2 and other GACA requirements for the safety management system manager (representative) acceptance and I am satisfied that the information contained in this application is true, correct and completed.			
Name		Signature	Date

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### B. For GACA USE ONLY

B. For GACA USE		COMPLIANCE	
		YES	NO
1.	<b>Assess the applicant knowledge and Familiarity with the following area:</b>		
a.	GACAR-PART 5 and other applicable GACARs. The SMS related areas in the EBOOK Volumes (V2, V3, V4, V12, etc.), AC 005-01, Guidance materials, Process and procedures.		
b.	Comprehensive knowledge for the Organization's Manuals (Operations, Training, QMS, etc.).		
c.	Thorough knowledge of the Organization's Safety Management System (Manuals, Policy and Objectives, Reporting System, Safety Promotion, etc.)		
d.	Be able to demonstrate relevant knowledge, background and appropriate experience related to the activities of the organization;		
e.	General Knowledge of the Safety Management System (Objectives, Pillars, Elements, Responsibilities, Accountabilities, Management, Personnel, etc.)		
f.	The Objectives and Purposes of the Safety Management System		
g.	Safety policy, Objectives and strategy		
h.	The primary role and responsibilities of the Safety Manager and Safety team.		
i.	Safety Management System scope of operations.		
J.	Safety Management system feedback system.		
k.	Safety Assurance Program (Plan, team, process and procedures, tools, records, etc.).		
l.	Safety and Quality Assurance Responsibility for Sub-Contractors.		
m.	State Safety Programme (SSP).		

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B. FOR GACA USE		COMPLIANCE	
		YES	NO
<b>2.</b>	<b>Assess the applicant skills for:</b>		
a.	The ability and confidence to communicate directly to the accountable executive as his advisor and confidante;		
b.	The ability to communicate at all levels both inside and outside the company		
c.	The ability to be firm in conviction, promote a “just and fair culture” and yet advance an open and non-punitive atmosphere for reporting		
d.	Well-developed communication skills and demonstrated interpersonal skills of a high order, with the ability to liaise with a variety of individuals and organizational representatives, including those from differing cultural backgrounds		
e.	Applicant must successfully complete an interview with GACA that covers the safety manager’s required competencies.		

### C. FOR GACA USE ONLY

<b>1.</b>	Nominated Safety Manager Acceptance	<input type="checkbox"/> Accepted	<input type="checkbox"/> Rejected
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NO.	Remarks

Inspector Name	Signature	Date

### Supporting Documents

1. The official requesting/cover letter;
2. Copy of Applicant C.V.;
3. Copy of the relative and required certificates, Licenses, Training, etc.;
4. Prof of the relative Qualifications & experience;
5. Copy of Passport/ID
6. ID Photo