



SFI SP(A) initial application

Application form

Applicant's Licence Nr.

Applicant : Last name: _____ First name: _____ Date of birth: _____

Private address: Street: _____

Postal code: _____ City: _____ Country: _____

Phone home: _____ Phone office _____ E-mail: _____

Employed as pilot by: _____ **Company Name**: _____

Invoice and licence to be sent to company applicant

Signature of applicant

SFI(SPA) application on aircraft type: _____ SPO MPO

Summary of conditions and flight experience:

- a) hold or have held a CPL, MPL or ATPL in the appropriate aircraft category issue date: _____
- b) hold or have held a multi-engine IR(A) issue date _____
- c) 500 hours flight time as PIC on single-pilot aeroplanes hours _____
- d) have completed the FSTD content of the applicable type rating course date: _____
- e) have completed the proficiency check for the issue of the specific aircraft type rating in an FFS representing the applicable type, within the 12 months preceding the application date: _____
- f) have completed, as a pilot or as an observer, within 12 months preceding the application, at least
 - (i) 3 route sectors on the flight deck of the applicable aircraft type; or sectors: _____
 - (ii) 2 line-orientated flight training-based simulator sessions conducted by qualified flight crew on the flight deck of the applicable type. These simulator sessions shall include 2 flights sessions: _____
 of at least 2 hours each between 2 different aerodromes
- g) have completed the relevant TRI(SPA) course at an ATO, including 25 h teaching and learning date _____
10 h of technical training and at least 5 h flight instruction on the appropriate aircraft or FFS hours: _____
- h) Completed an Assessment of Competence in accordance with FCL.935 date _____

Enclose FOCA Form 60.722

- i) To conduct flight instruction in multi-pilot operations hold or have held a TRI certificate for multi-pilot aeroplanes, valid until: _____
or have completed all of the following:
 - 1. at least 500 hours as pilots in multi-pilot operations on aeroplanes hours: _____
 - 2. the training course for an MCCI in accordance with point FCL.930.MCCI date: _____

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: _____

FOCA internal use only:

SFI SP(A) validity date : _____ TR: _____ date: _____

SP OPS MP OPS Remarks: _____ visum: _____