



**SFI SP (H)
Type extension**

Applicant's licence number:

Applicant last name: _____ first name: _____ date of birth: _____
 place of birth: _____ place of origin: _____ nationality: _____
 post code: _____ city: _____ street: _____
 phone/fax home: _____ phone/fax office: _____
 e-mail: _____ signature of applicant: _____
 Total flight hours: _____ PIC hours: _____ Copi hours: _____ IFR total hours: _____ Simulator hours: _____
 Employed as pilot by: _____ Invoice to be sent to: applicant company

SFI SP(H) application for aircraft Type: _____ **Date:** _____

Details of conditions and flight experience

- a) Type of License CPL or ATPL (H): _____
- b) SFI SP(H) valid until: _____
- c) has satisfactorily completed the simulator content of the relevant type rating course; and date: _____
- d) has conducted on a complete type rating course at least 3 hours of flight instruction related to the duties of an SFI on the applicable type under the supervision and to satisfaction of a TRE qualified for this purpose. date: _____
- e) TRE Name: _____
Signature: _____

FOCA internal use only:		
<input type="checkbox"/> SFI SP(H) validity date:	TR: _____	date: _____
Remarks :	visum: _____	