



**MCCI (H)
initial application**

Applicant's licence number:

Applicant last name: _____ first name: _____ date of birth: _____
 place of birth: _____ place of origin: _____ nationality: _____
 private address: postcode: _____ city: _____ street: _____
 phone/fax home: _____ phone/fax office: _____
 e-mail: _____ **signature of applicant:** _____
 Helicopter flight hours: _____ PIC hours: _____ Copi hours: _____ IFR total hours: _____ Simulator hours: _____
 Employed as pilot by (AOC/FOM holder) _____ Invoice to be sent to: applicant company

MCCI(H) application on helicopter:

Date: _____

Details of conditions and flying experience

- a) Hold or have held a CPL(H) or ATPL(H) date of issue: _____
- b) Experience as pilot in multi-crew operation (MNM 1000 hours) hours: _____
of which at least
- c) 350 hours in multi-pilot helicopters. hours: _____
- d) have completed an approved MCCI(H) course at an ATO, date: _____
- e) 25 HR teaching and learning, or credit acc. FCL.930.MCCI date: _____
- f) technical training related to the type of FSTD where the applicant wishes to instruct date: _____
- g) 3 hours of practical instruction according FCL.930 MCCI (a)(3) date: _____
- h) Copy of assessment of the applicant's competence acc. FCL.920.
- i) Copy of logbook (relevant pages)

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Instructor <small>required</small>	last name: _____	first name: _____
licence number:	signature of flight instructor: _____	
ATO <small>required</small>	name: _____	registration number: _____
name of chief flight instructor:	licence number: _____	
location & date:	signature of chief flight instructor: _____	

<small>FOCA internal use only:</small>		
<input type="checkbox"/> MCCI(H) restricted validity date:	type: _____	date: _____
<input type="checkbox"/> MCCI(H) validity date:	type: _____	visum: _____