



**TRI MP (H)
Revalidation / Renewal**

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: _____

Employed as pilot by: _____ company internal invoice to: applicant company

Expiry date of TRI MP(H) certificate: _____ **Date of last TRI MP(H) assessment of competence:** _____

Additional privileges held to instruct for:

- TRI

For Revalidation of a TRI MP (H) certificate, the holder shall fulfil 2 of the requirements 1), 2) or 3) below:

For at least each alternate TRI MP(H) revalidation, the holder shall pass an assessment of competence acc. Part FCL.935

1) complete 50 hours of flight instruction on each of the type of aircraft for which instructional privileges are held or in FSTD representing those type of which at least 15 hours shall be within the 12 months preceding the expiry date of the TRI certificate. hours: _____

2) receive instructor refresher training as a TRI at an ATO (**enclose confirmation**) date: _____

3) pass an assessment of competence acc. FCL.935 (**enclose form 61.722**) date: _____

For Renewal of a TRI MP (H) certificate, the applicant shall fulfil the requirements 4) and 5) below:

4) receive instructor refresher training as TRI at an ATO, which should cover the relevant element of the TRI training course; and date: _____

5) pass the assessment of competence in acc. with FCL.935 in each of the types of aircraft in which renewal of the instructional privileges is sought date: _____

Data confirmed by ATO (or enclose copies of the relevant pages of logbook)	
name: _____	registration number: _____
name of chief flight instructor: _____	licence number: _____
signature of chief flight instructor: _____	location and date: _____

FOCA internal use only:		
TRI MP (H) validity date: _____	type: _____	date: _____
Remarks: _____	visum: _____	