

Application for the issue of a pilot's licence (certificate of validation, conversion to a Part-FCL licence) Applicable for a foreign ICAO licence issued by a third country (non EASA member state) Applicant: Last name: First name: Date of birth: Nationality: Place and country of birth: Place of origin (for Swiss citizens only): Private address: Street/box: Postal code: City: Country: Phone: E-mail: Employed as pilot by (company name): Company address: Invoice and licence to be send to: □ applicant □ company I hereby authorise the issuing Civil Aviation Authority of licence and medical certificates to provide all relevant information for this application to the Swiss Federal Office of Civil Aviation (FOCA). **Requested type of licence Requested category of licence Requested level of licence** Certificate of validation □ Private (PPL, SPL, BPL) Aeroplane Swiss Part-FCL licence (Conversion) Helicopter Commercial (CPL/ATPL) Certificate of validation limited for Sailplane IR (Instrument rating) 28 days per calendar year (applicable for Balloon Hot-air private pilot licences only) Balloon Gas Type or class rating used for the EASA skill test: Total flight experience as pilot in that type or class rating*: * Copies of the relevant logbook pages showing the required flight experience in accordance with Part-FCL must be attached to this form. Details of applicant's foreign pilot licence and ratings State and name of issuing authority: Date of initial licence issue: Category of foreign pilot licence: Expiry date of licence (if applicable): No. of licence: Current qualifications and ratings: Date of initial issue: Expiry date(s): Without indication of class/type, IR rating (as relevant) validity in 3rd country pilot's licence, additionally: Proof of the valid and/or current class/type, IR rating (as relevant) in accordance with the applicable 3rd country regulations; and Indication of the legal references: Details of applicant's foreign ICAO medical certificate Category of foreign ICAO medical certificate Date of issue Date of expiry commercial private

ADMINISTRATIVE INFORMATION - FOR FOCA ONLY

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Details of applicant's flight experience and flight training

Aeroplane							
Total flight experience		Experience in the last 12 months		Experience in the last 6 months			
hours/mins	landings	hours/mins	landings	hours/mins	landings		
Total flight exerience on single engine		Total flight experience on <u>multi engine</u>		Total flight experience on multi pilot aeroplanes			
aeroplanes hours/mins	landings	aeroplanes hours/mins	landings	hours/mins	landings		
Experience IFR as PIC on single engine aeroplanes		Experience IFR as PIC on multi engine aeroplanes		Experience IFR as PIC on multi pilot aeroplanes			
hours/mins	landings	hours/mins	landings	hours/mins	landings		
Helicopter							
Total flight experience		Experience in the last 12 months		Experience in the last 6 months			
hours/mins	landings	hours/mins	landings	hours/mins	landings		
Experience IFR as PIC hours/mins	c on helicopters landings						
Sailplane		_					
Total flight experience		Experience in the last 12 months		Experience in the last 6 months			
hours/mins	landings	hours/mins	landings	hours/mins	landings		
Balloon gas							
Total flight experience		Experience in the last 12 months		Experience in the last 6 months			
hours/mins	landings	hours/mins	landings	hours/mins	landings		
Balloon hot-air							
Total flight experience		Experience in the last 12 months		Experience in the last 6 months			
hours/mins	landings	hours/mins	landings	hours/mins	landings		

By signing this form, I declare:

a) I know the relevant parts of EASA Part-FCL.

b) I do not possess a pilot licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another EASA Member State.

c) I have not applied for a pilot licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another EASA Member State.

d) I have never possessed any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another EASA Member State, which was revoked or suspended in any other EASA Member State.

e) The information provided is correct. I am aware of the consequences of providing false information such as having been denied or having had a revoked or cancelled licence, certificate, rating, authorisation or attestation.

Date and place:

Signature of applicant:

Please refer to the existing FOCA Checklists for the necessary documentation to enclose with this application.

Do not send this form without all the necessary documents referred to the check list!

Applicable to applications for a certificate of validation

An EASA examiner shall verify and confirm the following:

The applicant demo 1178/2011	onstrates the knowledge of the relevant parts of Annex I (Part-FCL) to the Regulation (EU) no			
(applicable to applicants for a commercial and non-commercial validation PPL/CPL/ATPL)				
Confirmation by an	EASA examiner:			
Examiner's name:	Authorisation no:			
Location & date: _	Signature of examiner:			
The applicant demonstrates the knowledge of the relevant parts of the operational requirements according to the Standardised European Rules of the Air (SERA) and (EU) No 965/2012: Air Operations (applicable to applicants for a commercial validation CPL/ATPL)				
Confirmation by an	EASA examiner:			
Examiner's name:	Authorisation no:			
Location & date: _	Signature of examiner:			