

Federal Department of the Environment, Transport, Energy and Communications DETEC Federal Office of Civil Aviation FOCA Safety – Division Flight Personnel 3003 Bern

Application form

FI (G) initial application			Applicant's Licence Nr.		
Applicant : Last name:		First name:		Date of birth:	
Private address: Street:					
Postal code: City:		City:	Country:		
Pho	ne:	E-mail:			
Applicants for a pilot license or a rating must have a contact address in Switzerland, any to FOCA				ntact address, has to be notified	
			Signat	ure of applicant:	
Summary of requirements for the issue of a FI(G):					
Name of training supervisor:					
Licence Nr:			_signature:		
a.	EASA Pilot Licence	☐ CPL ☐ ATPL			
b.	FI/CRI/TRI:	□ A	valid t	until:	
C.	Completed at least 50 HR total flight time	ompleted at least 50 HR total flight time as pilot on gyro		hours:	
d.	Completed an approved FI(G) course at an ATO		date:		
	Enclose copy of course confirmation.			1	
e.	Completed an Assessment of Competence as FI (G)		date:		
	Enclose FOCA Form 64.722				
Data confirmed by ATO/DTO ATO /DTO name: Registration nr:					
			Licence nr:		
Location & date: Sign		nature of Head of Training:			
FOCA internal use only: FI (G) validity date:			date:		
Remarks:		visum:			

ADMINISTRATIVE INFORMATION - FOR FOCA ONLY

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