



**FI(A)
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 FI(A) certificate: _____ **Date of last FI(A) assessment of competence:** _____

For Revalidation of a FI(A) certificate, the holder shall fulfil 2 out of the 3 requirements below:
For at least each alternate FI(A) revalidation, the holder shall pass an assessment of competence acc. Part FCL.935

For Renewal of a FI(A) certificate, the applicant shall fulfil the requirements of 2) and 3):

1a) 50 h as FI, CRI, IRI, TRI, MI or examiner during the period of validity of the FI(A) rating, hours: _____
of which

1b) 10 h IR instruction within 12 months preceding the expiry date of the FI(A) rating. hours: _____
(1b applicable only if the privilege to instruct for IR is to be revalidated)

2) attend an approved FI(A) refresher seminar within the validity period of the FI(A) rating, or, in case of renewal, within 12 months before the application date: _____
(Enclose copy of course confirmation)

3) pass an assessment of competence acc. FCL.935 within 12 months preceding the expiry date of the FI(A) rating, in case of renewal, within 12 months before the application date: _____
(Enclose form 60.722)

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:		
162 FI(A) validity date: _____	Class or type: _____	date: _____
Remarks: L P C S M I F MP AC ST BT NT		visa: _____