



**Type Rating Instructor  
Initial Application (SPH SE)**

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

**TRI(H) application on helicopter type:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Details of conditions and flying experience**

- a) Licence CPL(H) or ATPL(H) date of issue: \_\_\_\_\_
- b) IR (H) single-engine helicopter (if applicable) valid until: \_\_\_\_\_
- c) EASA Medical class 1 or 2 with or without IR valid until: \_\_\_\_\_
- d) flight experience (MNM 250 HR as pilot on helicopters) hours: \_\_\_\_\_
- e) flight experience as pilot on type (MNM 15 hrs) hours: \_\_\_\_\_
- f) Successfully completed an approved TRI course at an approved ATO Date: \_\_\_\_\_  
Place: \_\_\_\_\_
- g) Conduct on a complete type rating course at least 2 HR flight instruction as TRI on the applicable type under supervision and satisfaction of a TRI notified by the Authority Date: \_\_\_\_\_  
Place: \_\_\_\_\_
- h) assessment of competence if < 15 hours on type (copy) Date: \_\_\_\_\_

<b>Instructor</b> <small>required</small>	last name: _____	first name: _____
licence number: _____	signature of flight instructor: _____	
<b>ATO</b> <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"/> 251 TRI(H) validity date: _____	type: _____	date: _____
		visum: _____