

## STATEMENT OF QUALIFICATION (DAR-DER-DME)

<b>1. NAME OF APPLICANT or ORGANIZATION:</b>		<b>3. NATIONALITY:</b>		
<b>2. BUSINESS ADDRESS:</b>		<b>4. ID NUMBER:</b>		
		<b>5. DATE OF BIRTH:</b>		
<b>Phone:</b>	<b>Email:</b>	<b>Fax:</b>		
<b>6. DESIGNATION SOUGHT</b>				
<input type="checkbox"/> DESIGNATED ENGINEERING REPRESENTATIVE (DER)	<input type="checkbox"/> STRUCTURE ENGINEERING	<input type="checkbox"/> ENGINE ENGINEERING		
	<input type="checkbox"/> POWER ENGINEERING	<input type="checkbox"/> PROPELLER ENGINEERING		
	<input type="checkbox"/> SYSTEM & EQUIPMENT ENGINEERING	<input type="checkbox"/> FLIGHT ANALYST		
	<input type="checkbox"/> ACOUSTICAL ENGINEERING	<input type="checkbox"/> FLIGHT TEST PILOT		
<input type="checkbox"/> DESIGNATED AIRWORTHINESS REPRESENTATIVE (DAR)	<input type="checkbox"/> MANUFACTURING FUNCTIONS	<b>NOTE :A separate application may Be submitted for each Function i.e. Manufacturing, Engineering, Maintenance.</b>		
	<input type="checkbox"/> ENGINEERING FUNCTIONS			
	<input type="checkbox"/> MAINTENANCE FUNCTIONS			
<input type="checkbox"/> DESIGNATED MECHANICS EXAMINER (DME)	<input type="checkbox"/> AIRFRAME			
	<input type="checkbox"/> POWERPLANT			
	<input type="checkbox"/> AIRFRAME AND POWERPLANT			
<b>DAR APPLICANTS SHALL IDENTIFY SPECIFIC FUNCTIONS, FOR WHICH DESIGNATION IS SOUGHT:</b>				
<b>7. EXPERIENCE RESUME FOR NUMBER OF YEARS PERTINENT TO DESIGNATION SOUGHT</b> <i>(Use additional sheets if necessary)</i>				
<b>PERIOD</b>		<b>EMPLOYER'S NAME</b>	<b>POSITION TITLE AND DUTIES</b>	
<b>FROM</b>	<b>TO</b>			
<b>8. EDUCATION AND TRAINING HIGH SCHOOL " O" LEVEL AND ABOVE PERTINENT TO DESIGNATION SOUGHT</b>				
<b>PERIOD</b>		<b>NAME OF SCHOOL</b>	<b>CURRICULUM OR STUDY PROGRAM</b>	<b>DEGREE RECEIVED</b>
<b>FROM</b>	<b>TO</b>			
<b>9.GACA/FAA CERTIFICATES NOW HELD PERTINENT TO DESIGNATION SOUGHT</b>				
<b>TYPE</b>	<b>CERTIFICATE NUMBER</b>	<b>RATING</b>	<b>DATE EACH RATING ISSUED</b>	
<b>10 EMPLOYER'S RECOMMENDATION</b> <i>(To be completed for DER only)</i>				
<i>I RECOMMEND THE PERSON IDENTIFIED ABOVE TO BE APPOINTED AS DESIGNATED ENGINEERING REPRESENTATIVE</i>				
<b>PRIMARY BUSINESS:</b>		<b>SIGNATURE:</b>	<b>DATE:</b>	
<b>11: LOCATION WHERE DESIGNATED FUNCTIONS WILL BE PERFORMED</b>				
<b>ADDRESS:</b>			<b>TELEPHONE NO:</b>	
<b>12. CERTIFICATION:</b> <i>I certify that the above statements are true to the best of my knowledge and that I am familiar with GACA Regulations Pertinent to the designation sought.</i>				
<b>SIGNATURE:</b>			<b>DATE:</b>	

