

submit at least 120 days before the beginning of any proposed training or 60 days before effecting an amendment to any approved training unless a shorter filing period is approved by the President. Formal Application for renewal Certification shall be valid for 180 calendar days starting from the date of application.

1. APPLICANT DETAILS					
Training Center Name					
Address of Principal Business office					
Address of Main Operations Base					
TC Satellite address, if applicable					
Current TC Certificate & Operations Specifications number				Expiry Date	
Head of Training Contact Details					
Name	Phone Number		E	E-Mail	

2. TR	AINING COURSES DETAILS
No	Course Title
1	
2	
3	
4	
5	

3. MANAGEMENT STRUCTURE DETAILS				
Post	Name	Contact No.	E-Mail	
Accountable Manager				
Head of Training				
Quality Manager				
Safety Manager, if applicable				
Chief Flying Instructor, if applicable				
Chief Ground Instructor, if applicable				

4. TRAINING STAFF DETAILS		
Number of the employed TC Instructors		
Number of the employed Ground Instructors		
Number of the contracted TC Instructors		
Number of the contracted Ground Instructors		
Number of the employed TC Evaluators		
Number of the contracted TC Instructors		

* Note: Training Staff numbers and details could be listed in attachment to this application form

5. FL	5. FLIGHT SYNTHETIC TRAINING DEVICES DETAILS					
No	А/С Туре	FSTD Type (FFS/FTD/ATD)	FSTD level	Serial Number		
1						
2						
3						



4			
5			
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7			
8			
9			
10			
11			
12			
13			
14			
15			
6. APPROVED	TRAINING FACILITIES DE	TAILS	
	ions Accommodation		
Туре	Location	Size	Number
Briefing Room			
FSTDs			
Rest Room			
Staff Office			
Maintenance			
Record Keeping			
	raining Facilities		
	raining Facilities Location	Size	Number
(b) Theoretical T		Size	Number
(b) Theoretical T Type		Size	Number
(b) Theoretical T Type Classroom		Size	Number
(b) Theoretical T Type Classroom CBT Room		Size	Number

7. FINANCIAL DETAILS

Financial Requirements

GACA Economic Authority

*Attach copy of GACA Economics/Financial acceptance

8. ACCOUNTABLE MANAGER DECLARATION

- I hereby apply for (xxx) Training Center Certificate renewal in accordance with GACAR PART 142 and other applicable GAGARs and EBOOK Volumes requirements;
- The minimum qualification requirements for each management position are incompliance with GACA requirements;
- (xxx) Training Center acknowledged that any change made in the assignment of persons in the required management positions must be notified the President within 10 working days;
- (xxx) Training Center Management and Personnel are committed to maintain continuous compliance with the



GACAR PART 142 and all other applicable GACA requirements.

• I certify that the information contained in this application is true, corrected and completed

Accountable Manager Name	Signature	Date



GACA APPROVAL (GACA USE ONLY)

1. GACA Assessment.					
Training Center (TC) approval/certificate will be issued or renewed in accordance with the GACAR PART 142 and the other applicable GACARs and EBOOK Volumes					
Application form and all Supporting Documents Assessment Status					
Applicant, (Training Center), has satisfactorily completed all required process and procedures	□ Accepted	□ Rejected			
Training Center Certificate Renewal Status	□ Accepted	□ Rejected			
2. Remarks					
No					
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3. Approval Details	
Training Center (TC) Name	
Certificate/Approval and Operations Specifications Expiry Date	
Others, if applicable	

20



4. TC Certificate/Approval Restriction or limitations, if applicable.				
No	Restriction or limitations			
1				
2				
3				
4				
5				

Air Safety Inspector (ASI) Name Signature D							
5. App	5. Application Form Attachments and supporting Documents						
No	Supporting Docu	ments		YES	NO		
1	Copy of the Current Training Center Certificate & Operations Specifications						
2	2 Copy of GACA Economic Approval						
3	Copy of GACA Certificate Fees						
4	A copy of Applicant (Training Center) letter of Certificate Renewal requesting						
5	List of current Approved FSTDs (GACA certificate(s) and specifications)						
6	Copy of current approved FSTDs, if required						
7	Copy of current Foreign FSTDs certificates and specifications, if required						
8	Copies of leases, agreements, and contracts, if applicable	2					
9	O Copy of the completed certification job aid (Audit/Inspection Compliance Checklist)						
10	Compliance statement, if applicable, could be part of the a	pproved TC Training and Operation	ns manual				
11	Copy of List of Current Instructors						
12	Copy of List of current Evaluators/Examiners						