

SYNTHETIC FLIGHT INSTRUCTOR (SFI) ISSUANCE/RENEWAL APPLICATION FORM (AIRPLANE/HELICOPTER)

GACAR-PART 142

Flight Simulator (FSTD) - Instructor ratings/authorizations (TCI/SFI) are valid for a period of 24 calendar month

A. FOR APPLICANT USE ONLY

1. APPLICANT DETAILS

| | | | |
|---|--|----------------|---------------------|
| Applicant Name | | | |
| Address | | | |
| Contact No. | | | |
| Date of Birth (dd/mm/yy) | | Place of Birth | |
| Nationality | | ID No. | |
| I hereby declare that the information given in this form is true, correct & completed | | | Applicant Signature |

2. APPLICATION DETAILS

| | | |
|--|---|-----------------|
| I am applying for the Training Center Instructor/Synthetic Flight Instructor issuance on | | () Type Rating |
| Aircraft Category | <input type="checkbox"/> Airplane (A) <input type="checkbox"/> Helicopter (H) | |
| Pilot License Type | | |
| Pilot License Number | | |
| License Expiry Date, if applicable, (dd/mm/yy) | | |
| Current Type Rating (A/H) on | | |
| Type Rating Expiry Date (dd/mm/yy) | | |

3. TRAINING CENTER DETAILS

| | |
|----------------------|---|
| Training Center Name | <input type="checkbox"/> Airplane <input type="checkbox"/> Helicopter |
| Address | |
| Contact No. | |
| Address | |

4. TRAINING CENTER INSTRUCTOR (TCI/SFI) AUTHORIZATION ISSUANCE REQUIREMENTS

i. Pre-requisite for TCI/SFI instructor.

| No | GACAR-Part 142 Requirements | YES | NO |
|-----|--|--------------------------|--------------------------|
| (a) | A certificate holder may not employ a person as an instructor in a flight training course that is subject to approval by the President unless that person: | | |
| 1. | Is at least 18 years of age; | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. | Hold or has held at least the license for which instruction is being given (at least Commercial Pilot License) | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. | Hold at least the rating(s) & qualification for which instruction is being given | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. | Is able to read, write, speak and understand in the English language according to GACAR § 61.51; | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. | If instructing in an aircraft in flight, is qualified in accordance with Subpart H of GACAR Part 61; | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. | Satisfies the training and testing requirements of paragraph (c) of GACAR-PART 142(142.55); and | <input type="checkbox"/> | <input type="checkbox"/> |

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| | | | |
|----|---|--------------------------|--------------------------|
| 7. | Meets the following requirements: | <input type="checkbox"/> | <input type="checkbox"/> |
| | (i) Except as allowed by paragraphs (a)(7)(ii) and (iii) of this section, meets the aeronautical experience requirements of Appendix C to GACAR Part 141, and the aeronautical experience and aeronautical knowledge requirements of Appendix E to GACAR Part 141, (as applicable), excluding the required hours of instruction in preparation for the commercial pilot practical test; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (ii) If instructing in an FSTD that represents an Airplane/Helicopter requiring a type rating or if instructing in a curriculum leading to the issuance of an airline transport pilot (ATP) certificate or an added rating to an ATP certificate, meets the aeronautical experience requirements of Appendix D to GACAR Part 141, as applicable; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (iii) A person who holds a ground instructor certificate issued under Subpart I of GACAR Part 61, and providing only classroom instruction, is not required to meet the requirements of paragraph (a)(7)(i) of this section. | <input type="checkbox"/> | <input type="checkbox"/> |

| ii. Training Center Instructor Authorization/Certificate Issuance Requirements (General) | | | |
|--|---|--------------------------|--------------------------|
| No | GACAR-Part 142 Requirements | | |
| (a) | A training center must designate each instructor in writing to instruct in each approved course, prior to that person functioning as an instructor in that course: | YES | NO |
| (b) | Prior to initial designation, each instructor must— | <input type="checkbox"/> | <input type="checkbox"/> |
| | Complete at least 8 hours of ground training on the following subjects: | <input type="checkbox"/> | <input type="checkbox"/> |
| | (i) Instruction methods and techniques; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (ii) Training policies and procedures; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (iii) Fundamental principles of the learning process; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (ii) Elements of effective teaching, instruction methods, and techniques; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (iv) Instructor duties, privileges, responsibilities, and limitations; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (v) Proper operation of simulation controls and systems; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (vi) Proper operation of environmental control and warning or caution panels; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (vii) Limitations of simulation; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (viii) Minimum equipment requirements for each curriculum; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (ix) Revisions to the training courses; and | <input type="checkbox"/> | <input type="checkbox"/> |
| | (x) Crew resource management and crew coordination. | <input type="checkbox"/> | <input type="checkbox"/> |
| | (vi) Evaluation; and | <input type="checkbox"/> | <input type="checkbox"/> |
| | (vii) Training in knowledge and skills related to human performance. | <input type="checkbox"/> | <input type="checkbox"/> |
| | Satisfactorily complete a written test— | <input type="checkbox"/> | <input type="checkbox"/> |
| | (i) On the subjects specified in paragraph (c)(1) of GACAR PART-142 (142.55) section which are listed above (b (1)); and | <input type="checkbox"/> | <input type="checkbox"/> |
| | (ii) That is accepted by the President as being of equivalent difficulty, complexity, and scope as the tests provided by the President for the flight instructor airplane and flight instructor instrument knowledge tests. | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. | Applicant Must meets and completes all Training Center Instructor requirements in accordance with GACAR PART 142; | <input type="checkbox"/> | <input type="checkbox"/> |
| | Pass Practical (skill) test/Check as follows: | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. | Conducting as a part of type rating training course or ATPL training course on Multi-Pilot (A/H) at least (2) hours of flight instruction related to the duties of a TCI/SFI on the applicable type of Airplane(A) or Helicopter(H) under GACA supervision, if required, and to the satisfaction of a TCE/SFE notified by GACA. Note: the said (2) hours excluding briefing and debriefing. | <input type="checkbox"/> | <input type="checkbox"/> |

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| iii. Training Center Instructor (TCI/SFI) Requirements for the Airline Transport Pilot Certification Training Program | | | |
|---|--|--------------------------|--------------------------|
| No | GACAR-Part 142 Requirements (142.56) | | |
| 1. | In addition to the requirements prescribed GACAR § 142.55 which are mentioned above, no certificate holder may use a person nor may any person serve as an instructor in an ATP certification training course for the airplane category multiengine class rating approved to meet the requirements of GACAR § 61.173(d) unless the instructor: | YES | NO |
| | (a) Holds or has held an ATP certificate with an airplane category multiengine class rating; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (b) Has at least 2 years of experience as a PIC or SIC in any operation conducted under GACAR Part121; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (c) Except for the holder of a flight instructor certificate, receives initial training on the following topics: | <input type="checkbox"/> | <input type="checkbox"/> |
| | (1) The fundamental principles of the learning process; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (2) Elements of effective teaching, instruction methods, and techniques; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (3) Instructor duties, privileges, responsibilities, and limitations; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (4) Training policies and procedures; and | <input type="checkbox"/> | <input type="checkbox"/> |
| | (5) Evaluation. | <input type="checkbox"/> | <input type="checkbox"/> |
| | (d) If providing training in an FSTD: | <input type="checkbox"/> | <input type="checkbox"/> |
| | (1) Holds an aircraft type rating for the aircraft represented by the FSTD utilized in the training program and have received training and evaluation within the preceding 12 months from the certificate holder on the maneuvers that will be demonstrated in the FSTD; and | <input type="checkbox"/> | <input type="checkbox"/> |
| | (2) Satisfies the requirements of GACAR § 142.59(a)(4) which states that The approved FSTD training course required by paragraph (a)(3) of this section must Include: : | <input type="checkbox"/> | <input type="checkbox"/> |
| | (i) Proper operation of FSTD controls and systems; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (ii) Proper operation of environmental and fault panels; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (iii) Limitations of simulation; and | <input type="checkbox"/> | <input type="checkbox"/> |
| (iv) Minimum equipment requirements for each curriculum. | <input type="checkbox"/> | <input type="checkbox"/> | |

| iv. Training Center Instructor Training and Testing Requirements | | | |
|--|---|--------------------------|--------------------------|
| No. | GACAR-Part 142 (142.59) Requirements | | |
| (a) | Except as provided in paragraph (c) of this section, prior to designation and every 12 months beginning the first day of the month following an instructor's initial designation, a certificate holder must ensure that each of its instructors meets the following requirements: | YES | NO |
| 1. | Each instructor must satisfactorily demonstrate knowledge of, and proficiency in, instructing in a representative segment of each curriculum for which that instructor is designated to instruct under this part. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. | Each instructor must satisfactorily complete an approved course of ground instruction at least: | <input type="checkbox"/> | <input type="checkbox"/> |
| | (i) The fundamental principles of the learning process; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (ii) Elements of effective teaching, instruction methods, and techniques; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (iii) Instructor duties, privileges, responsibilities, and limitations; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (iv) Training policies and procedures; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (v) Crew resource management and crew coordination; | <input type="checkbox"/> | <input type="checkbox"/> |
| | (vii) Evaluation; and | <input type="checkbox"/> | <input type="checkbox"/> |
| | (vii) Training in knowledge and skills related to human performance. | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. | Each instructor who instructs in a qualified and approved FSTD must satisfactorily complete an approved course of training in the operation of the FSTD, and an approved course of | <input type="checkbox"/> | <input type="checkbox"/> |

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| | ground instruction, applicable to the training courses the instructor is designated to instruct. | | | |
| 4. | The approved FSTD training course required by paragraph (a)(3) of 142.59 section must include: | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (i) Proper operation of FSTD controls and systems; | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (ii) Proper operation of environmental and fault panels; | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (iii) Limitations of simulation; and | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (iv) Minimum equipment requirements for each curriculum. | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. | In addition to the all-applicable TCI authorization/certificate requirements in accordance with GACAR-PART 142 that are listed in this form, each flight instructor who provides training in an aircraft must satisfactorily complete, in an aircraft or qualified and approved FSTD, an approved course of ground instruction and flight training including instruction in the following: | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (i) Performance and analysis of flight training procedures and maneuvers applicable to the training courses that the instructor is designated to instruct; | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (ii) Technical subjects covering aircraft subsystems and operating rules applicable to the training courses that the instructor is designated to instruct; | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (iii) Emergency operations; | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (iv) Emergency situations likely to develop during training; and | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (v) Appropriate safety measures. | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. | Each instructor who instructs in qualified and approved flight training equipment must pass a written test and annual proficiency check: | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (i) In the flight training equipment in which the instructor will be instructing and | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (ii) On the subject matter and maneuvers of a representative segment of each curriculum for which the instructor will be instructing. | <input type="checkbox"/> | <input type="checkbox"/> | |
| (b) | In addition to the requirements of paragraphs (a)(1) through (6) of this section, each certificate holder must ensure that each instructor who instructs in an FFS that the President has approved for all training and all testing for the ATP certification test, aircraft type rating test, or both, has met at all training and all testing for the ATP certification test, aircraft type rating test, or both, has met at least one of the following three requirements: | <input type="checkbox"/> | <input type="checkbox"/> | |
| | 1. Each instructor must have performed 2 hours in flight, including three takeoffs and three landings as the sole manipulator of the controls of an aircraft of the same category and class, and, if a type rating is required, of the same type replicated by the approved FFS in which that instructor is designated to instruct. | <input type="checkbox"/> | <input type="checkbox"/> | |
| | 2. Each instructor must have participated in an approved line observation program under GACAR Part 121 or 135, and that: | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (i) Was accomplished in the same airplane/helicopter type as the airplane represented by the approved FFS in which that instructor is designated to instruct and | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (ii) Included line-oriented flight training of at least 1 hour of flight during which the instructor was the sole manipulator of the controls in an approved FFS that replicated the same type aircraft for which that instructor is designated to instruct; or | <input type="checkbox"/> | <input type="checkbox"/> | |
| | 3. Each instructor must have participated in an approved in-flight observation training course that: | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (i) Consisted of at least 2 hours of flight time in an airplane/helicopter of the same type as the airplane/helicopter replicated by the approved FFS in which the instructor is designated to instruct and | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (ii) Included line-oriented flight training of at least 1 hour of flight during which the instructor was the sole manipulator of the controls in an approved FFS that replicated the same type aircraft for which that instructor is designated to instruct. | <input type="checkbox"/> | <input type="checkbox"/> | |
| | (c) | An instructor who satisfactorily completes a curriculum required by paragraph (a) or (b) of this section in the month before or after the month in which it is due is considered to have taken it in the month in which it was due for the purpose of | <input type="checkbox"/> | <input type="checkbox"/> |

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| | computing when the next training is due. | | |
| (d) | The President may give credit for the requirements of paragraph (a) or (b) of this section to an instructor who has satisfactorily completed an instructor training course for a certificate holder operating under GACAR Part 121 or 135 if the President finds such a course equivalent to the requirements of paragraph (a) or (b) of this section (§ 142.59). | <input type="checkbox"/> | <input type="checkbox"/> |

5. INSTRUCTOR RECOMMENDATION

I hereby certify that, applicant meets GACAR 142 requirements for Training Center Instructor skill test/check as a TCI on () ☐ Airplane ☐ Helicopter Type Rating.

| Instructor Name | Signature | Date |
|-----------------|-----------|------|
| | | |

6. HEAD OF TRAINING RECOMMENDATION

I hereby certify that the applicant meets GACAR PART 142 requirements for Training Center Instructor skill test/check as TCI on Airplane/Helicopter Type Rating (), and I have checked the applicant license, logbook and Training records. I am satisfied that the information contained in this application is correct and he is recommended for TCI skill test/check on () FSTD.

| Training Post Holder Name | Date |
|---------------------------|------|
| | |

B. FOR GACA USE ONLY

1. *EVALUATOR/EXAMINER DESIGNATION

The undersigned, GACA Training Centers Section Manager authorizes TCE Capt. XXX to conduct skill test/check for the Training Center Instructor (TCI/SFI) flight instruction on (XXX) Type Rating (A/H).

| TC Manager Name | Signature | Date |
|-----------------|-----------|------|
| | | |

*For Training Center /Synthetic Flight Instructor Authorization (TCI/SFI) issuance practical check/test will be observed by GACA Aviation Safety Inspector or GACA/FOS or GACA may delegate this task to the approved Senior Examiner/Evaluator.

2. EXAMINER RECOMMENDATION (TCE/SFE NOTIFIED BY GACA)

| | | | |
|--------------------------------------|---|----------------------------|------|
| Date (dd/mm/yy) | | Test flight duration time | |
| TC Name | | Aircraft (A/H) Type Rating | |
| FSTD Type | | | |
| TCI/SFI check/Test result | <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory | | |
| Examiner/Evaluator Recommendation(s) | | | |
| Examiner/Evaluator Name | | Signature | Date |
| | | | |

3. GACA SUPERVISION (ASI OR SENIOR EXAMINER)

| Name | Position | Signature | Date |
|------|----------|-----------|------|
| | | | |

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| 4. GACA RECOMMENDATION. | | | |
|--|---|---|--|
| TCI/SFI issuance | <input type="checkbox"/> Approved | <input type="checkbox"/> Not approved | |
| Aircraft Category | <input type="checkbox"/> Airplane | <input type="checkbox"/> Helicopter | |
| TCI/SFI Authorization/Certificate privileges | <input type="checkbox"/> Initial Type Rating Training. <input type="checkbox"/> Type Rating Requalification Training. <input type="checkbox"/> Type Rating combined PIC Up-Grade Training. <input type="checkbox"/> Transition Type Rating Training. <input type="checkbox"/> Others (Specify): | | |
| TC Instructor certificate/authorization issuance date (dd/mm/yy) | | TC Instructor certificate/authorization expiry date | |
| License type | | License Expiry date, if applicable | |
| Aircraft Type rating (dd/mm/yy) | | Aircraft Type rating expiry date | |
| Remarks | | | |

| Inspector Name | Signature | Date |
|----------------|-----------|------|
| | | |

| | | | |
|----------------------|--|-----------|--|
| Training Center Name | | Signature | |
|----------------------|--|-----------|--|