

## **AIRMAN CERTIFICATE AND/OR RATING APPLICATION**

	APPLICATION INFORMATION								GAC	A Certificate	No.					
Reissuance Reason:										РНОТО						
	MECHANIC						REPAIRM	AN						3 x 3 cm		
AIRFRAME									(Specify	(Rating)				White background with no		
		POWERP	PLANT											'	nead cover.	
		A. Nar	me (First,	Middle, Las	st)	B. Sau	di ID/Iqar	na No.	C. Pa	ssport N	No.	D. Date of	Birth			
E. Address							F. Pl				of Birth	ı	G.	Country	of Citizensh	nip
Stre	et				House					1. Flago of Birat			C. Committee Committee			•
City					State/Province				H. Do yo		•	, write, & ur	& understand the English language?			
	ntry					Postal Code							□ No			
	ne (Land)				Mobile	Mobile			I. Height (cm) J.			eight (kg)	K. Ha	lair L. Eyes M. Sex		M. Sex
Ema						"C 1 0	tificate 2				Cortificate Number O Iso				D	,
N. Do you now hold, or have you ever held a GACA Airman Certi							0. 1	. Type of Certificate P. Certificate Nur					nber Q. Issue Date R. Expiry Date			
		☐ Yes			□ No								<u> </u>			
S. F	lave you e	ver had a	n Airmar	certificat	e suspended or revol	ked?	Yes	□N	0	(If "Yes"	explain be	elow. Continue of	on a separa	ate sheet, if r	nore space ne	eded)
T. H	lave you e	ver been	convicted	d for viola	tion of any statutes re	elated to ps	ychoactiv	e substan	ces?				U. E	ate of Fir	nal Conviction	on
						010										
II.	CERTIFIC	CATE O	R RATII	NG APP	LIED FOR ON BA											
	A. Civil E	Experience	Э			itary Experi	ence			C. Lette			tion for Repairman			
					1. School Name						2. Sch	ool Location				
	D. Grad	uate of Ap	oproved	School	2 Cobool No			1 Cumico	lum frans	which -	rod: st-	nd .		5. Graduation Date		
					3. School No.			4. Curricu	iuiii irom	WHICH C	yrauuate	u		o. Gradua	auon Date	
	E Stude	nt has me	has made estisfactory		School Name					2 Sch	hool Location					
		ent has made satisfactory s and is recommended to		1. Concorrent					2. 00.	noor Education						
		Oral/Prac			3. School No. 4. Scho			ool Official	Name / S	Signatur	re					
	(GACA/GAC															
	F. Specia Mechani	al Authoriz c's Oral/P	zation to ractical to	take est	1. Date Auth. 2. Date Auth.			Auth. Exp	oires	3. GA	CA Insp	ector Name	me / Signature			
F. Special Authorization to take Mechanic's Oral/Practical test (GACA/GACAR 66.67)  1. Date Auth. 2. Date Auth. Expires 3. GACA Inspector Name / Signature																
	(GACA/GAC	CAR 66.67)														
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## **AIRMAN CERTIFICATE AND/OR RATING APPLICATION**

RESULTS OF KNOWLEDGE TESTS										REMAF	RKS
GENERAL			AIRFRAME			OWERP	LANT				
Date		Date			Date						
Take		Take			Take						
Score	DECLI	Score	RAL AND PRAC		Score						
	RESUL										
			MECHANIC								
	l.	GENERA	AL - Airframe and P	owerplant							
ORAL TEST	☐ PAS	3	Expiration Date				☐ FAIL				
QUES. NO.											
PRACTICAL TEST	☐ PAS	3	Expiration Date				☐ FAIL				
PROJECT NO.						<u> </u>					
II. AIRFRAME STRUCTURES											
II. AIRFRAME STRUCTURES  ORAL TEST											
	□ FAG	, <sub> </sub>	Lxpiration bate				□ I AIL				
QUES. NO.											
PRACTICAL TEST	☐ PAS	5	Expiration Date	<u> </u>	-		☐ FAIL				
PROJECT NO.											
III. AIRFRAME SYSTEMS AND COMPONENTS											
ORAL TEST	☐ PAS	3	Expiration Date				☐ FAIL				
QUES. NO.											
PRACTICAL TEST	☐ PAS	3	Expiration Date				☐ FAIL				
PROJECT NO.						, I					
	IV. PO	WERPLAN	IT THEORY AND M	IAINTENA	NCE						
ORAL TEST	□ PAS		Expiration Date				□ FAIL				
QUES. NO.	1					<u> </u>					
PRACTICAL TEST	☐ PAS		Expiration Date				☐ FAIL				
	□ FAS	)	Expiration Date		1		□ FAIL	•			
PROJECT NO.											
V. POWERPLANT SYSTEMS AND COMPONENTS											
ORAL TEST	☐ PAS	3	Expiration Date				☐ FAIL				
QUES. NO.											
PRACTICAL TEST	☐ PAS	3	Expiration Date				☐ FAIL				
PROJECT NO.											
				AIRMAN'	S IDENT	IFICAT	ION				
Form of ID			Date of	Birth				Ema	ail Address		
ID Number			Expiration	n Date	Tele				none Number		
			DESI	GNATED	EXAMI	NER'S I	REPORT				
I have personally teste	d this applica	nt in accord	dance with pertinen	t procedure	es and sta	ndards,	and I have	indicate	d the result as:		
☐ APPROVED (Tempo				OVED (Ten			OT Issued)		□ DISAPPROV	/ED	
Attachments	☐ Report	Of Written		☐ Super	rseded Ce	rtificate			ry Certificate	☐ Lett	
Date Test Completed	E:	xaminer's Name				Sigr	nature		D€	esignation No.	
			Al	PPLICAN	IT'S CER	TIFICA	TION				
			st Be Completed By		icant At Th	ne Time	Of Issuand	ce Of Te	mporary Certifi	cate	
Have You Ever Had A	n Airman Cerl	ificate Sus	pended or Revoked	d?				☐ Yes		□ No	
Have You Ever Been Convicted For Violation Of Any Statutes Related To Psychoactive Substances?										□ No	
Date of Final Convi	ction	I Cort	ify That The Statem	ente Rv M	o Δro True	2			Signature		Date
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			G	ACA INS	PECTOF	R'S REF	PORT				
I Have Personally							The Indica		ılt		
☐ Examined This Applicant's Papers ☐ APPROVED											
☐ Tested This Applicant In Accordance With Pertinent Procedures And Standards ☐ DISAPPROVED											anactor Number
Date Inspector's Signature Inspector Name (Print Name) Inspector									spector Number		
FILE ATTACHMENTS AS APPLICABLE											
□ Copy - Foreign License/Certificate (if applicable) □ Copy/original Knowledge Test Report(s) (as applicable) □ Copy - GACA Airman Certificate (if applicable) □ Copy - Airman ID □ Copy - Temporary Airman Certificate (if applicable) □ Copy - Temporary Airman Certificate (if applicable)											
□ Copy - Valid Airman Passport □ Copy - Official Course Completion Certificate (s) (if applicable) □ Superseded Airman Certificate (if applicable)											
☐ Copy - Official Receipt		oplicable)	☐ Copy - Prior E						☐ Evidence of red		

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