

# Application for issue/revalidation/ renewal of (Student) Air Traffic Controller (ATCO) licence, ratings and endorsements

According to the requirements to Regulation (EU) 2015/340. GM1.ATCO.AR.D.001(a)

| Part A: Ap         | pplicant's de                  | tails                           |  |   |                   |            |  |  |
|--------------------|--------------------------------|---------------------------------|--|---|-------------------|------------|--|--|
| Name               |                                |                                 |  |   | Date of birth (do | l/mm/yyyy) |  |  |
| Permanent addre    | ess                            |                                 |  |   |                   |            |  |  |
| Postal code        |                                | City                            |  |   |                   |            |  |  |
| Tel/mobile number  |                                | E-mail address                  |  |   |                   |            |  |  |
| (Student) ATCO     | Licence details (if a          | pplicable)                      |  |   |                   |            |  |  |
| Licence serial No  | 0                              |                                 |  |   |                   |            |  |  |
| Employer's detai   | ils (if applicable)            |                                 |  |   |                   |            |  |  |
| Part B: Ap         | plication fo                   | r (Tick the                     | relevant boxes)  |   |                   |            |  |  |
| ☐Issue of <i>i</i> | ATCO Licence<br>tion of ATCO I | , rating(s) ar<br>₋icence ratin | ting(s) and rating endorse<br>nd rating endorsement (P<br>g, endorsement (Part C, I<br>endorsement (Part C, D, E | art C, E and F of this<br>D, E and F of this fo | s form)           | ))         |  |  |
| Part C: Ra         | nting/Rating                   | endorsem                        | ent/ATC unit/Sector/V  | Vorking position                                |                   |            |  |  |
|                    | Unit                           | Sector                          | Working position   |   |                   |            |  |  |
| ☐ ADI              |                                |                                 |  | ☐ TWR   | ☐ GMS             | ☐ RAD      |  |  |
| ☐ APS              |                                |                                 |  | ☐ PAR   | ☐ SRA             | ☐ TCL      |  |  |
| ☐ ACS              |                                |                                 |  | ☐ TCL   |                   |            |  |  |
| □ ACP              |                                |                                 |  |   |                   |            |  |  |
|                    |                                |                                 |  |   |                   |            |  |  |
|                    |                                |                                 |  |   |                   |            |  |  |
| Instructor endors  | sements                        |                                 |  |   |                   |            |  |  |
| OJTI               | ☐ STDI ☐ Assessor              |                                 |  |   |                   |            |  |  |
| Declaration        | •                              | comply with                     | all necessary requiremen   | nts indicated for the                           | endorsement       |            |  |  |
| Date (dd/mm/yyyy)  |                                |                                 | comply with all necessary requirements indicated for the endorsement.  Name, Manager operations/C ATS            |   |                   |            |  |  |
| Signature, Mana    | ger operations/C AT            | TS                              |  |   |                   |            |  |  |
|                    |                                |                                 |  |   |                   |            |  |  |

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Telephone

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## Part D: Unit endorsement revalidation/renewal

The applicant meets the requirement according to Regulation (EU) 2015/340 and to the unit

The unit/licence endorsement annotated below are revalidated/renewed  $^{\star}$  (delete as appropriate).

| Based on this, <b>REVALIDA</b>   | TION/RENEWAL can be dor                 | ne as listed below.              |                           |  |  |  |  |  |
|--|---|----------------------------------|---------------------------|--|--|--|--|--|
| Unit endorsement   |   | Valid until                      |                           |  |  |  |  |  |
|  |   |                                  |                           |  |  |  |  |  |
|  |   |                                  |                           |  |  |  |  |  |
|  |   |                                  |                           |  |  |  |  |  |
|  |   |                                  |                           |  |  |  |  |  |
|  |   |                                  |                           |  |  |  |  |  |
|  |   |                                  |                           |  |  |  |  |  |
|  |   |                                  |                           |  |  |  |  |  |
| Attach copies of revalidation/renewal on licens holders certificate  |   |                                  |                           |  |  |  |  |  |
| I certify that the data is complete and true   |   |                                  |                           |  |  |  |  |  |
| Authorised assessor and licence number   | Der .                                   | Name                             |                           |  |  |  |  |  |
|  |   |                                  |                           |  |  |  |  |  |
| Signature  |   |                                  |                           |  |  |  |  |  |
|  |   |                                  |                           |  |  |  |  |  |
|  |   |                                  |                           |  |  |  |  |  |
|  | . •                                     | holder has fulfilled the require | ements in accordance with |  |  |  |  |  |
| the approved unit competence scheme (if part D is filled in)   |   |                                  |                           |  |  |  |  |  |
|  |   |                                  |                           |  |  |  |  |  |
| Part E: Declaration  |   |                                  |                           |  |  |  |  |  |
| I b a male   |   |                                  |                           |  |  |  |  |  |
| I hereby  1 apply for the issue/revalidation/renewal of (Student) ACTO Licence, rating and/or endorsement as indicated;  |   |                                  |                           |  |  |  |  |  |
|  |   | _                                |                           |  |  |  |  |  |
| 2 confirm that the information contained herein is correct at the time of the application;   |   |                                  |                           |  |  |  |  |  |
| <ul> <li>confirm that I am not holding any (Student) ATCO Licence issued in another Member State;</li> <li>confirm that I have not applied for any (Student) Licence in another Member State; and</li> </ul> |   |                                  |                           |  |  |  |  |  |
|  | • |                                  |                           |  |  |  |  |  |
|  |   | cence issued in another Men      | nber State which has been |  |  |  |  |  |
| -  | in any other Member State.              | rain aguld probibit ma from b    | olding a (Student) ATCO   |  |  |  |  |  |
| Licence.   | rect information provided he            | rein could prohibit me from h    | biding a (Student) ATCO   |  |  |  |  |  |
| Date (dd/mm/yyyy)  | Name                                    |                                  |                           |  |  |  |  |  |
| 24.0 (44, 7,7,7,7)   |   |                                  |                           |  |  |  |  |  |
| Signature  |   |                                  |                           |  |  |  |  |  |
| - Signature  |   |                                  |                           |  |  |  |  |  |
|  |   |                                  |                           |  |  |  |  |  |
|  |   |                                  |                           |  |  |  |  |  |
| Part F: Certificates/Doc   | cuments                                 |                                  |                           |  |  |  |  |  |
| Please enclose all relevant certificate and/or documents and fill in the boxes   |   |                                  |                           |  |  |  |  |  |
| ☐ 1. Copy of relevant training certificate/documents proving the successful completion of  |   |                                  |                           |  |  |  |  |  |
| ☐ a. Initial training  |   |                                  |                           |  |  |  |  |  |
| ☐ b. Rating training   |   |                                  |                           |  |  |  |  |  |
| ☐ c. Unit training   |   |                                  |                           |  |  |  |  |  |
| ☐ d. Practical instructor training   |   |                                  |                           |  |  |  |  |  |
| ☐ e. Assessor training   |   |                                  |                           |  |  |  |  |  |
| ☐ f. Refresher training  |   |                                  |                           |  |  |  |  |  |
| ☐ 2. Copy of applicant certificate where renewal/revalidation is inserted by assessor  |   |                                  |                           |  |  |  |  |  |
| 2. Copy of applicant cer   | tificate where renewal/revalid          | dation is inserted by assessor   |                           |  |  |  |  |  |



Instruction for completing application for issue/revalidation/ renewal of (Student) Air Traffic Controller (ATCO) licence, ratings and endorsements

## A. Applicant's details

Please enter complete information

### B. Application for

Please tick relevant boxes

Issue = the first issue/Sign by applicant

- student ATCO licence,
- ATCO licence,
- ratings,
- rating endorsements,
- unit endorsements

#### Revalidation = Assessor fills in and sign

- valid ratings,
- · valid rating endorsements,
- valid unit endorsements

#### Renewal = Assessor fills in and sign

- lapsed ratings,
- lapsed ratings endorsements,
- lapsed unit endorsements

### C. Rating/rating endorsement/ATC unit/sector/working position

Please tick relevant boxes for rating and/or rating endorsement. If applicable, enter information about unit and sector/position.

## Other endorsement (OJTI, STDI, Assessor)

Please tick relevant boxes for license endorsement.

Note! It is only the Manager operations/C ATS who is allowed to certify the applicant's experience.

#### D. Unit endorsement revalidation/renewal

This field shall only be used when the assessor transfer the revalidation/renewal of unit endorsements to the licence.

## E. Declaration

Only the applicant may sign this declaration.

#### F. Certificates/Documents

Please tick relevant boxes and include documents necessary.