SWEDISH TRANSPORT AGENCY

Application PC examiner course
Ref TSL 2023-275

Applicant information

Name	License number

Address

Postcode	Town/city

Telephone number	E-mail address

Flight time information

Total flighttime	MPA, if applicable	MPA PIC, if applicable
Flighttime as TRI/SFI, if applicable	On the following type(s)	Flighttime as instructor, if applicable

Signature

Date	City

Signature

Send the application as a scanned file in pdf-format to luftfart@transportstyrelsen.se and write TSL 2023-275 in the subjectline.