Form No: CAA/PL/I/10



CIVIL AVIATION AUTHORITY OF SRI LANKA

APPLICATION FOR FLIGHT OPERATIONS OFFICER LICENCE

Particulars of the Applicant

1.	Full Nan	ne (In Block	(Letters):					
			•••					
2.	Surname	with initial	s:					
3.	Date of l	Birth :			Age			
4.	National	ity :						
5.	NIC / Pa	NIC / Passport Number :						,
6.	Postal A	.ddress :						
7.	Contact '	Contact Telephone Numbers :						
0	Fax Nun	nber:		E	E-mail:			
8.								
8.	Deta	ails of the T						
	State wh (If yes, p	nether you ha	raining ave followe th details)	ed an approv	red training c	ourse : Ye		
	State wh (If yes, p	nether you had blease furnishe of the train	Training ave followersh details) ning course	ed an approv	ed training c	ourse : Ye		
	State wh (If yes, p i. Nam ii. Date iii. Nam	nether you had blease furnished of the trainer of commenter & Address	ave followersh details) ning course acement & course sof the train	ed an approve	red training of the training training of the training tra	ourse : Ye		
	State wh (If yes, p i. Nam ii. Date iii. Nam	nether you had blease furnishe of the trainer of commenses & Address	ave follower th details) ning course acement & course sof the train	ed an approve	red training of the training cation:	ourse : Ye		
9.	State wh (If yes, p i. Nam ii. Date iii. Nam iv. Attac	nether you had blease furnished of commende & Address	ave follower th details) ning course accement & completion ave success	ed an approve	red training of the training zation:	ourse : Ye	zation : Yes	
9.	State wh (If yes, p i. Nam ii. Date iii. Nam iv. Attac . State wh (If yes ,p	nether you had blease furnished of commende & Address ched Course nether you had blease furnished.	ave followersh details) ning course acement & completion ave success the details)	ed an approved analysis and approved an approved analysis approved an approved	red training of the training cation :	ourse : Ye	zation : Yes	
9.	State wh (If yes, p i. Nam ii. Date iii. Nam iv. Attac . State wh (If yes ,p i. OJT	nether you had blease furnishe of the trainer of commente & Address ched Course nether you had blease furnishe Centre :	ave follower th details) ming course accement & completion ave success th details)	ed an approved analysis and approved an approved analysis approved an approved	of the training control of the	ourse : Ye	zation : Yes	/ No



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iii. Attached OJT Assessment Report: Yes /No

11.	State whether you have successfully completed Route Familiarization : Yes / No (If yes ,please furnish details)
	Date:
	i. Attached Route Familiarization Report : Yes /No
12.	State whether you have successfully completed Simulator Observation : Yes / No (If yes ,please furnish details)
	Date :
	ii. Attached Simulator Observation Report:: Yes /No
	Details of the FOO Examination
	State whether you have successfully completed the Flight Operation's Officer Examinatio conducted by CAASL: Yes / No (If yes ,please furnish details) Year of completion:
	Details of the Employer
14.	State whether you are a person employed or employable for flight dispatching in an airline for commercial air transport operations with an approved method of control & supervision of flight operations: Yes / No (If yes ,please furnish details)
	i. Name of the employer:
	ii. Address of the employer:
	iii. Designation:
	iv. Date of employment:
	v. Attached a copy of the employment offer letter · Yes / No

I hereby certify that I am aware of the requirements and conditions applicable to the issue of a Flight Operations Officer Licence as specified by the DGCA. I also declare that the particulars furnished by me in this application form are true and accurate to the best of my knowledge. If any of the particulars furnished above is found to be inaccurate, I accept that the application will be rejected/ results of the examination will be declared null & void.

Application Color Lawn Green	
	 Form No: CAA/PL/I/10
Date	Signature of Applicant