Kingdom of Saudi Arabia
General Authority of Civil Aviation
Safety and Economic Regulation

المملكة العربية السعودية
الهيئة العامة للطيران المدني
السلامة والتراخيص الاقتصادية

APPLICATION FOR PILOT SCHOOL CERTIFICATION

NAME OF SCHOOL **TELEPHONE NO.**	**ADDRESS OF PRINCIPAL BUSINESS OFFICE**
LOCATION OF MAIN OPERATIONS BASE	**LOCATION OF SATELLITE BASE(S)**

APPLICATION IS HEREBY MADE FOR:

☐ Issuance of a Pilot School Certificate and associated ratings to conduct the training courses identified below, and for the approval of these courses *(three copies of each course outline are attached)*; also, examining authority is requested for the courses appropriately checked.

☐ Renewal of a Pilot School Certificate and associated ratings currently numbered _____ ,
which expires on   /   /

☐ without changes to the currently approved course outlines,   ☐ with addition of course(s) identified below for which approval is requested (three copies of each course outline is attached), including request for examining authority for the course(s) appropriately checked;

☐ with deletion of course(s) identified below from the curriculum.

☐ Amending the current Pilot School Certificate and associated ratings numbered _____ ,
which expires on   /   /

☐ by adding the course(s) identified below for which approval is requested (three copies of each course outline are attached), including request for examining authority where appropriately checked;

☐ for deletion of the course(s) identified below from the curriculum.

IDENTIFICATION OF TRAINING COURSES	**NOTE,** Where examining authority for a course is desired, piece and "X" in the box adjacent to the course identification.
☐ _____	☐ _____
☐ _____	☐ _____
☐ _____	☐ _____
☐ _____	☐ _____
☐ _____	☐ _____
☐ _____	☐ _____

(If more space is needed, continue on page 2 in space provided)

I (WE) certify that I am (we are) familiar with Part 141 of the GACA / FARs, and, to the best of my (our) knowledge, believe that my (our) school meets the requirements for certification as prescribed therein.

Signature and Title(s) { _____
_____
_____

Date :

FOR GACA USE ONLY

☐ APPROVED ☐ a Provisional Pilot School Certificate   ☐ a Pilot School Certificate, either with associated
☐ DISAPPROVED   ratings bearing the number shown above
                                                                                                     is issued effective   /   /
                                                                                                     and which expires on   /   /

☐ Renewal   ☐ without amendments   ☐ with amendments   ☐ Amendments

SIGNATURE OF APPROVING OFFICIAL	TITLE	DATE

Recommendations of Inspector(s) on page 2

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INSTRUCTIONS TO THE APPLICANT: Submit an original and one copy of this application, completed in full, along with the required number of attachments where specified on the face of this form, to the GACA - S&ER Office having jurisdiction over the area in which the school is located. Signatures on the application should be as follows:

a. Application from a person acting as an individual should be signed by the owner;

b. Application from a partnership should be signed by all partners;

c. Application from a corporation should be signed by the president or such other officers as authorized by the corporation by-laws to sign for the corporation and certified to by the corporate secretary attesting to the authority of the individuals to sign such a document;

d. Application from a company, club, or association should be signed by the president or such other officer or director as authorized by the organization's by-laws, and attested to by the secretary.

IDENTIFICATION OF TRAINING COURSES (Continued)   *NOTE: Where examining authority for a course is desired, place and "X" in the box adjacent to the course identification.*

☐ _____   ☐ _____
☐ _____   ☐ _____
☐ _____   ☐ _____
☐ _____   ☐ _____
☐ _____   ☐ _____
☐ _____   ☐ _____
☐ _____   ☐ _____

THE FOLLOWING SPACE FOR GACA USE ONLY

Recommendations of Inspector(s)

INSPECTORS' SIGNATURES AND DATES	FOR OPERATIONS	FOR MAINTENANCE	FOR AVIONICS
	Date	**Date**	**Date**