Flight Safety Department Libyan Civil Aviation Authority PEL SECTION



APPLICATION FORM FOR TRE (A)

LIC. Type &No.

Application form for TRE(A)

WARNING TO ALL APPLICANTS – Any false statement, misrepresentation or concealment of material fact on this form or any document presented in support of this application may be grounds for criminal prosecution

Application form for issue of a TRE (A)

To be completed by the applicant
ast and First Name:
Date of birth ://
Address: Email:
Mobile No. :
TRE (A) Requested on the following type:
Type of lic. Held : ☐ ATPL (A) ☐ CPL (A)
Note: Applicants wishing to conduct the MPL skill test must provide proof of meeting the requirements in ECL.925 Experience:
Pilot of multi-pilot aeroplanes: hours (1500 hrs minimum)
Pilot in command on multi-pilot aeroplanes:hours (500 hrs minimum)
light instruction as a TRI or SFI in the applicable type or an FSTD representing that type:hrs
50 hrs min.) Copy of log book required showing the above hours certified by the ATO
Date of last P1 revalidation check on type:(Copy required)
TRI(A) certificate number (Copy required)
examiner standardisation course completed on Date: (Copy of certificate required)
xaminer Assessment of competence passed on Date : with (Name of
nspector / Senior Examiner): (attach form Examiner Assessment of Competence)
Nere any of your licence/s, rating/s, certificate/s suspended, limited or revoked or were you otherwise
anctioned for non-compliance with the Basic Regulation and its Implementing Rules during the last 3

☐ YES

years?
□ NO

PEL SECTION Flight Safety Department Libyan Civil Aviation Authority



APPLICATION FORM FOR TRE (A)

Application form for TRE(A)

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Submission Instructions
Documents required:
☐1. A copy of the Certificate for the Examiners Standardisation Course.
☐ 2. Log Book showing flight instruction as TRI or SFI certified by the ATO.
☐3. Copy of Licence held.
☐ 4. Copy of the TRI Certificate.
☐ 5. Copy of Medical certificate.
\square 6. Last proficiency check on type if not already submitted.
☐7. Assessment of Competence Form
\square 8. Copy of your Criminal Record (not older than 3 months)