

## Examiner Authorisation – Application Form

Issue/Renewal     Revalidation

Date of Birth:		Name ( <i>last, first, middle</i> )		Address	
Postal code	City	E-mail		Phone number	
<b>Application for:</b>					
Flight Examiner.....FE Class Rating Examiner.....CRE Instrument Rating Examiner....IRE Flight Instructor Examiner.....FIE Type Rating Examiner.....TRE Synthetic Flight Examiner .....SFE		Specific application if requested (additional type, sp/mp ops etc)			
<b>FCL.1000.b</b> <b>FCL.1000.c</b>		<div style="border: 1px solid black; height: 100px; width: 100%;"></div>			
Examiner course attended; Date:			Place:		
Revalidation of Examiner authorisation only:					
Tests, checks and assessments performed within the latest validity period:					
<b>FE</b> <b>CRE</b> <b>IRE</b> <b>FIE</b> <b>TRE</b> <b>SFE</b>					
Valid Examiner privileges: (or attach copy of certificate)		Examiner auth. number		Expiry date	
I hereby declare that all the information are true and can be documented and that all Prerequisites in PART-FCL subpart K are fulfilled.					
Place:		Date:		Signature of Applicant	