



APPLICATION FOR LICENSE VALIDATION OR CONVERSION BASED ON A FOREIGN LICENSE

INSTRUCTIONS
Print or type. Do not write in shaded areas, these are for CAAP use only. Submit original only to the Flight Standards Inspectorate or a CAAP Authorized Person. If additional space is required, use an attachment

A. APPLICATION IS HEREBY MADE FOR ISSUANCE OF A PHILIPPINES LICENSE BASED ON VALIDATION OR CONVERSION OF A FOREIGN LICENSE:

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|--|--|--|
| 1 <input type="checkbox"/> ADDED RATING | 4 <input type="checkbox"/> MEDICAL CERTIFICATE | 7 <input type="checkbox"/> FLIGHT INSTRUCTOR |
| 2 <input type="checkbox"/> PILOT | 5 <input type="checkbox"/> AVIATION MAINTENANCE TECHNICIAN | 8 <input type="checkbox"/> FLIGHT DISPATCHER |
| 3 <input type="checkbox"/> FLIGHT ENGINEER | 6 <input type="checkbox"/> INSPECTION AUTHORIZATION | 9 <input type="checkbox"/> FLIGHT NAVIGATOR |

B. AIRMAN PERSONAL INFORMATION:

1. NAME (Last, First, Middle)				2. PERMANENT ADDRESS (Street or PO Box Number)					
3. TELEPHONE AND FAX				4. CITY		/STATE/PROVINCE		MAIL CODE	COUNTRY
5. DATE OF BIRTH (MONTH, DAY, YEAR)			6. PLACE OF BIRTH			7. NATIONALITY (CITIZENSHIP)		8. LANGUAGE PROFICIENCY LEVEL 4? <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. HEIGHT	10. WEIGHT	11. HAIR	12. EYES	13. SEX	14. E-MAIL ADDRESS			15. For CAAP Use	

C. PILOT INFORMATION:

1. LICENSE NUMBER		2. STATE OF ISSUE		3. DATE ISSUED		4. RATING(S) REQUESTED				
5. TOTAL FLIGHT HRS		6. TOTAL PIC HRS		7. TOTAL X-C HRS		8. TOTAL NIGHT HRS		9. INSTRUMENT PIC		10. TOTAL HRS TYPE
11. RATINGS AND LIMITATIONS TO BE ISSUED								12. ASSIGNED NUMBER AND EXPIRATION DATE		

D. OTHER LICENSE INFORMATION:

1. LICENSE NUMBER		2. STATE OF ISSUE		3. DATE ISSUED		4. RATING(S) REQUESTED		
5. RATINGS AND LIMITATIONS TO BE ISSUED						6. ASSIGNED NUMBER AND EXPIRATION DATE		

E. MEDICAL EVALUATION INFORMATION:

1. CLASS OF CERTIFICATE		2. STATE OF ISSUE		3. DATE OF ISSUE		4. MEDICAL EXAMINER	
5. LIMITATIONS OR RESTRICTIONS TO BE ISSUED				6. ASSIGNED NUMBER AND EXPIRATION DATE			

**G. ATTACH APPLICANT PHOTO HERE
(Passport Size)**

F. APPLICANT'S CERTIFICATION— I certify that all statements and answers provided by me on this application form are complete and true to the best of my knowledge and I agree that they are to be considered as part of the basis for issuance of any Philippines license to me.

A person shall not with intent to deceive: (c) make any false representation for the purpose of procuring for himself or any other person the grant, issue, renewal or variation of any such license...

1. DATE	2. APPLICANT SIGNATURE:
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H. CAAP AUTHORIZED PERSON CERTIFICATION:

<input type="checkbox"/> 1. LANGUAGE PROFICIENCY TEST ADMINISTERED		<input type="checkbox"/> 3. CONFIRMATION CONTACT MADE WITH ISSUING CIVIL AVIATION AUTHORITY	
<input type="checkbox"/> 2. RECOMMEND ISSUANCE OF LICENSE		TELEPHONE: _____ NAME: _____	
		ICAO CONTRACTING STATE: _____	
4. DATE	5. TITLE OR DESIGNATION NUMBER	6. SIGNATURE	7. CASORT ENTRY:

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Copies of all issued Philippines license(s) attached | <input type="checkbox"/> Copy of other State's medical evaluation attached | <input type="checkbox"/> Last 12 months experience reviewed (required for Inspection Authorization) | <input type="checkbox"/> Copy of applicable aircraft-specific training or experience attached |
| <input type="checkbox"/> Copy of other State's airman license(s) attached | <input type="checkbox"/> Airman logbook reviewed for experience requirements | <input type="checkbox"/> Copy of aircraft lease reviewed for applicable time period | <input type="checkbox"/> Other relevant experience or training documents attached |