

Converting Pilot Initial Issue (RPC002)

APPLICANT TO COMPLETE

PERSONAL DETAILS

Surname	Given names	
Preferred name	Title	Date of birth
Membership Number	Membership Expiry	
Phone (H)	Phone (M)	Phone (B)
Residential address		
Suburb	State	Postcode
Postal address (if different)		
Suburb	State	Postcode
Email	Occupation	
Emergency contact name	Number	

APPLICANT'S DECLARATION (Please tick relevant boxes)

- ☐ I certify I am able to understand and carry out instructions given in the English language and my health standard is equivalent to that required for the issue of a private motor vehicle driver licence in Australia.
- **Note:** Are you 75 or over OR do you have any of the following conditions: Epilepsy, Diabetes, Heart condition/disease or paralysis, Mental illness (medicated or otherwise) or any other medically significant safety related condition?
- ☐ If **Yes**, I understand that I must not exercise the privileges of a pilot certificate or act as pilot in command of a RAAus aircraft until I have forwarded to RAAus a statement from my doctor (GP) confirming I meet the health standard equivalent to that required for the issue of a private motor vehicle driver licence in Australia. If **No**, no further action required.

I, _____, Member Number _____ agree that the flight and theory instruction provided to me regarding this application meets the requirements of the RAAus Flight Operations Manual and Syllabus of Flight Training.

Applicant's Signature _____ Date _____

Payment Details and Tax Invoice

Authorised amount: Fee of \$49 includes Pilot Certificate Issue, 3 Axis/Weightshift Microlight/PPC, nose wheel and/or tail wheel, human factors training, radio operator* (*and any other endorsement completed at time of issue). Future endorsements obtained will be subject to fees in accordance with the RAAus schedule of fees and charges.

TOTAL AUTHORISED PAYMENT AMOUNT: \$49

Payment method:	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Cheque/Money Order (payable to Recreational Aviation Australia Ltd)
Card number:	Expiry date:	CCV:	
Cardholder's name:	Signature:		

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EXAMINER AND APPLICANT TO COMPLETE (Refer RAAus Operations manual)

Member Name	Membership Number
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Pilot Qualifications:

Member #/ARN

Level obtained

e.g. student/pilot/commercial

☐ CASA ☐ SAFA ☐ GFA ☐ ASRA ☐ ADF/overseas military

International Qualifications:

Country

Ratings Held

Note: Complete an Endorsement Recognition (END002) form and attach verified copies of all qualifications with this application including copies of relevant Pilot Log Book pages if required.

Practical and Documentation

In accordance with the RAAus Operations Manual, the applicant has:

- ☐ Demonstrated required competency and Examiner satisfied all areas of syllabus have been taught, including Human Factors training
☐ Completed Flight Time Requirements ☐ Passed relevant Flight Test / Check ☐ Ground Theory / Exams completed
☐ Log book entry made and signed, hours recorded true and correct
☐ Attached a copy of the applicant's previous pilot qualifications

Flight Test / Check conducted in: Aircraft Type	Aircraft Registration
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Aeronautical Experience (Hours)

Hours in:	Aircraft <600kg MTOW*	Other Aircraft	Total Experience
Pilot in Command			
Dual			

Minimum converting experience of 5 hours (minimum 1 hour solo) in RAAus registrable aircraft. Total aeronautical experience must exceed 20 hours.

Note: *An Aircraft that is eligible for registration with RAAus with a MTOW of 600kg or less, however is registered with another National Airworthiness Authority such as CASA, FAA or CAANZ.

Certification

I certify that I have tested this applicant and believe that having been trained on:

- ☐ Group A Three Axis ☐ Group B Weightshift Microlight ☐ Group D Powered Parachute
☐ Nose Wheel Aircraft ☐ Tail Wheel Aircraft

They have demonstrated the required competency in accordance with the RAAus Syllabus of Flight Training.

In accordance with the requirements of the RAAus Flight Operations Manual, I also certify that they have been trained in accordance with the relevant Civil Aviation Orders, Civil Aviation Regulations, any relevant legislation and RAAus requirements. I have examined the log book of the applicant and certify that the above hours are recorded in the log book and are accepted as a fair record of the aeronautical experience of the applicant.

Examiner name	Membership Number
Signature	Date
Name of Flight Training School	

Endorsement Recognition (END002 for use with RPC002)

NOTE: This form only to be used when accompanying Converting Pilot Application Form OR for current members for recognition of currently held equivalent endorsements.

PERSONAL DETAILS

Surname	Given names
Membership Number	Membership Expiry

To be completed by Examiner

Proof of equivalent endorsement must be attached or application will not be processed.

ENDORSEMENT TYPE

- | | | |
|--|---|---|
| <input type="checkbox"/> Advanced Pilot Award | <input type="checkbox"/> In Flight Adjustable Propeller | <input type="checkbox"/> Tail Wheel |
| <input type="checkbox"/> Cross Country ¹ | <input type="checkbox"/> Low Level | <input type="checkbox"/> Two stroke |
| <input type="checkbox"/> Formation ¹ | <input type="checkbox"/> Nose Wheel | <input type="checkbox"/> Utility |
| <input type="checkbox"/> Glider Towing ² | <input type="checkbox"/> Passenger ³ | <input type="checkbox"/> Waterborne Float |
| <input type="checkbox"/> Hang Glider Towing ² | <input type="checkbox"/> Radio Operator | <input type="checkbox"/> Waterborne Hull |
| <input type="checkbox"/> Human Factors | <input type="checkbox"/> Retractable Undercarriage | |

¹ For Cross Country and Formation, consideration must be given to the minimum recency and experience requirements referred to in the RAAus Flight Operations Manual.

² Hang Glider and Glider Towing endorsement must be recognised by RAAus and SAFA or GFA respectively and have SAFA Tug Master approval or written permission from GFA to tow gliders.

³ Candidate must have minimum 2 hours PIC in an RAAus registerable aircraft to be issued with a Passenger endorsement

Examiner name	Membership number
Signature	Date
Name of Flight Training School	