



PERSONAL DETAILS:

Membership Number		Date of birth	
Last name			
Given names			
Residential address			
Suburb		State	Postcode
Postal address (if different)			
Suburb		State	Postcode
Phone (M)		(H)	
Email			
Occupation			
Emergency contact name/phone number			

APPLICATION:

I hereby apply for the issue of a Instructor (\$20) Senior Instructor (\$20) CFI (\$30)

I have a current CASA Class 2 Medical Certificate or RA-Aus Medical Questionnaire (copy attached), and I am able to understand and carry out instructions given in the English language.

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

Signature	Date
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PAYMENT DETAILS:

TAX INVOICE

Payment method: Visa MasterCard Cheque/Money Order
(made payable to Recreational Aviation Australia Inc.)

Card number:	
Cardholder's name:	
Expiry: /	CCV:
Signature:	Date:
Authorised payment amount: \$	

Revised November 2017

Member Name	Membership Number
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Page two to be completed by both the applicant and RAAus Examiner (Refer RAAus Operations Manual)

Instructor Qualifications:	Level obtained e.g. Gr1 / CFI appr/ Snr Inst	Years held
<input type="checkbox"/> GA <input type="checkbox"/> HGFA <input type="checkbox"/> GFA <input type="checkbox"/> ASRA		

International Qualifications:

Country Ratings Held

Note: Complete an Endorsement Recognition 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:

- | | |
|--|---|
| <input type="checkbox"/> Demonstrated required competency | <input type="checkbox"/> Ground Theory / Exams completed |
| <input type="checkbox"/> Passed relevant Flight Test / Check | <input type="checkbox"/> Holds a valid RAAus Pilot Certificate and the following Endorsements: Radio Operator, Passenger Carrying, Cross Country, Human Factors |
| <input type="checkbox"/> Log book entry made and signed, hours recorded true and correct | <input type="checkbox"/> Completed Flight Time Requirements |
| <input type="checkbox"/> Examiner satisfied all areas of syllabus have been taught, including Human Factors training | <input type="checkbox"/> Attached a copy of the applicant's previous pilot qualifications |

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

	RAAus Aircraft	VH Registered Recreational Aircraft *	Other Aircraft *	Total Experience
Pilot in Command				
Dual				
Instructor				

Certification

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

- | | | |
|--|---|--|
| <input type="checkbox"/> Group A Three Axis | <input type="checkbox"/> Group B Weight Shift | <input type="checkbox"/> Group D Powered Parachute |
| <input type="checkbox"/> Nose Wheel Aircraft | <input type="checkbox"/> Tail Wheel Aircraft | |

That they are at a standard required for the issue of a:

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Instructor rating | <input type="checkbox"/> Senior Instructor rating | <input type="checkbox"/> CFI Approval |
|--|---|---------------------------------------|

In accordance with the requirements of the RAAus 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 the RAAus Syllabus and RAAus Operations Manual. 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	

Note * An Aircraft that could be registered with RAAus, however is registered by another National Airworthiness Authority such as CASA, FAA or CAANZ.