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IMPORTANT INFORMATION FOR APPLICANTS

- 1:** If you do not have an ARN, you must submit **Form 1162** (Aviation Reference Number (ARN) Application) including appropriate identification with **this** application.
- 2:** Please ensure your application and the checklist are completed correctly and that all required supporting documentation is provided. Incomplete applications will not be accepted and may be returned to you for amendment. **Fields marked with an * are mandatory.**

Family Name:* _____ Given Names:* _____ Date of Birth:* _____	ARN: <table border="1" style="width: 100%; height: 20px; background-color: #ffffcc;"> <tr> <td style="width: 16.6%;"></td> <td style="width: 16.6%;"></td> <td style="width: 16.6%;"></td> <td style="width: 16.6%;"></td> <td style="width: 16.6%;"></td> <td style="width: 16.6%;"></td> </tr> </table>						

CONTACT DETAILS

Note: It is a regulatory requirement that you notify CASA of any changes to your personal contact information.

Correspondence including permissions issued as a result of this application will be sent by post to the current postal address according to CASA's records.

Have you updated your personal and contact details with CASA?

You should notify CASA of any changes using one of the following methods:

- Log onto the CASA Self Service Portal <https://portal.casa.gov.au/selfservice/>
- Submit Online Change of Details form <https://portal.casa.gov.au/casaforms/addrchange.htm>

Section A: Type of Application *

- Aircraft Radiotelephone Operator Certificate (AROCP)
 Flight Radio Operator Licence (FROL)

Section B: Qualification Details

1. Personal Details * (as per Birth Certificate)

Title	Surname	Given Names	Date of Birth ____ / ____ / ____
Have you ever held a Flight Crew Licence?		<input type="checkbox"/> Yes – complete details below	<input type="checkbox"/> No
Class:	Number		Country of Issue:

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2. Security Check Requirements * – refer to the Aviation Transport Security Regulations Act 2005

To be completed for Flight Radio Operator Licence ONLY

To be eligible, applicants must satisfy background checking requirements.

Please select the option below that applies to you:

- I am under 18 years of age (if you are **not** an Australian citizen you will need to pass an immigration status check – please provided details below):

Nationality: _____ Passport Number: _____

Arrival date (most recent): ___/___/___ Place where you entered Australia: _____

- I am at least 18 years of age and hold a valid Aviation Security Identification Card (ASIC). Provide details below.

Note: If your current ASIC was issued before you turned 18, and you will be more than 18 years and 3 months when your application is processed, you will only be eligible for a licence if you have applied for a new ASIC before you reach 18 years and 3 months. Otherwise your ASIC will have been cancelled.

- I am at least 18 years of age and hold a valid Aviation Identification (AVID).

- Application attached

If you have an ASIC please enter the card details below. Attach a Certified True Copy, showing card details.

ASIC Number:		ASIC Expiry Date:	_____/_____/_____ Month Year
ASIC Issuing Body:			

3. Medical Certificate Details

To be completed for Flight Radio Operator Licence ONLY

Place of Medical Examination	Date of Examination ____/____/____	Expiry Date of Medical ____/____/____	Doctor's Name
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4. Particulars of Radio Certificate or Licence Held

Note: A Radio Operator Licence or Certificate issued by the competent authority in any country or details of the ADF qualification must be submitted **if recognition is desired.**

Licence	Type	Number
Certificate of Proficiency		
Flight Radio Operator Licence		

5. Results (to be completed by CASA FOI or Approved Check Radio Operator)

Examinations	Result	Examined by	Signature/ARN	Date
Flight Radiotelephone Practical Operating Test	PASS			____/____/____
Flight Radiotelephone Theory Examination	PASS			____/____/____
Name of Training Organisation or Company of Testing officer.				

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6. Details of any Regulatory Action, Traffic and Criminal Charges, Convictions or Imprisonment *

Note 1: Action includes, but is not limited to, suspension and cancellation of any aviation authorisation

Note 2: Includes Australian and overseas actions, charges, convictions or imprisonment

Has any action been taken against you; or Is any action in the process of being taken against you; or Have you been refused the issue of any aviation related licence, certificate, rating or authority by any organisation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been refused the issue of a transport related licence or certificate? (eg, pilot's licence, pilot certificate, driver's licence, boating licence,)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any criminal conviction or finding of guilt, which is less than ten years old, or any juvenile criminal conviction or finding of guilt, which is less than five years old? Note: You should also include all motor vehicle traffic-related convictions including those from overseas.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is suspension or cancellation action pending in relation to any aviation licence you hold?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you have answered yes to any of the above please provide details below. Include details about dates, actions, charges, convictions and imprisonment in Australia and Overseas. (attach a separate page if necessary).

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Section C: Applicant Checklist *

<input type="checkbox"/>	I am at least 16 years old
<input type="checkbox"/>	I hold a current ASIC/AVID card (Certified True Copy attached) or I am under 18, OR
<input type="checkbox"/>	ASIC/AVID application attached (not required for ACROP)
<input type="checkbox"/>	I hold a current Class 2 medical (not required for ACROP)
<input type="checkbox"/>	Radio Operator Licence or Certificate or details of the ADF qualification attached, if applicable
<input type="checkbox"/>	Payment Authorisation completed (cheque or money order attached if applicable) fee is \$50.00
<input type="checkbox"/>	All sections of the form are completed and I have signed the application declaration

Section D: Applicant Declaration *

I hereby certify that all statements in this application are true and correct in every particular and that I have read and understood all Civil Aviation Safety Regulation requirements relevant to this application. I consent to CASA using and disclosing my personal information in accordance with CASA's privacy policy including exchanging the information with Commonwealth, State and Territory government agencies (see www.casa.gov.au/privacy). I have attached all required documentation specified in the applicant checklist and acknowledge that to knowingly make a false statement is an offence against the *Criminal code Act 1995*.

I have read and understood my obligations under regulations 6.55 and 6.59 of the Aviation Transport Security Regulations 2005, with reference to my security status and any relevant criminal convictions.

Signature: _____	Date: ____ / ____ / ____
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Payment Authorisation

Applicant Details *

Surname:		Given Names:	
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Licence Fees *

Fee Code	Description	Total
<input type="checkbox"/> 5.1	Issue of Flight Radio Operator Licence	\$ 50
<input type="checkbox"/> 7.1	Issue of an Aircraft Radiotelephone Operator Certificate of Proficiency	\$ 50
Total Cost:		\$ _____

Details of Person Making Payment (if not the Applicant)

The receipt will be sent to the applicant's current postal address unless CASA is advised otherwise.

Individual's or Organisation's Full Name:		
Postal Address:		
State:	Postcode:	Country:
Contact Phone:		ARN: (if applicable)

Payment Options *

- I have enclosed a Cheque or Australian Money Order (**please make cheques payable to CASA**)
- I am paying by credit card

I hereby authorise the Civil Aviation Safety Authority to debit the following amount from my:		Mastercard <input type="checkbox"/>	Visa <input type="checkbox"/>												
Card Number:	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 25px; height: 25px;"></td> <td style="width: 25px; height: 25px;"></td> <td style="width: 25px; height: 25px;"></td> <td style="width: 25px; height: 25px;"></td> <td style="width: 25px; height: 25px;"></td> <td style="width: 25px; height: 25px;"></td> <td style="width: 25px; height: 25px;"></td> <td style="width: 25px; height: 25px;"></td> <td style="width: 25px; height: 25px;"></td> <td style="width: 25px; height: 25px;"></td> <td style="width: 25px; height: 25px;"></td> <td style="width: 25px; height: 25px;"></td> </tr> </table>													Expiry Date:	____/____
Card Holder Name (please print):		Total:	\$ _____												
Signature:		Date:	____/____/____												

Attach this Payment Authorisation Form (and Cheque / Money Order / Purchase Order) to the Application Form.

- **Mail to:** CASA Licensing and Registration Centre
CASA
GPO Box 2005
CANBERRA ACT 2601
- **Fax to:** 1300 737 187

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