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OR



### Download this form before you begin

Please download and complete with Adobe Acrobat. If you are using a browser to complete this form you may lose your information. Send this form and any attachments to [flighttesting@casa.gov.au](mailto:flighttesting@casa.gov.au).

## Purpose of this form

Use this form to apply to the CASA Flight Testing Office for an approval to conduct flight tests and grant class ratings, type ratings and additional training endorsements under CASA EX85/25—Flight Training and Flight Tests by grade 1 training endorsement holders (Exemptions and Approvals) Instrument 2025 and for enrolment into the CASA Flight Examiner Rating Course (FERC) eLearning modules in accordance with CASA EX85/25 subsection 5(1)(c)

The 6 modules are Legal, Principles of Assessment, Assessing HF and NTS, Plan, Conduct and Complete. Within the modules, you will be able to download a FERC workbook for your future use. This workbook does not need to be submitted to CASA. It is recommended that it is viewed and retained by the Part 141/142 operator.

If you have not completed modules 1 to 6, you will be enrolled into the FERC eLearning modules following receipt of payment.

Once all modules 1 to 6 have been satisfactorily passed, access to CASA's Flight Test Management system will be provided.

If CASA records show that you have already completed all six modules, you do not need to repeat the eLearning modules. You will be sent a FERC workbook following receipt of payment. It can also be downloaded from the CASA website.

## Who is this form for?

This form is for grade 1 training endorsement holders who wish to be approved in accordance with CASA EX85/25 to conduct flight tests and grant class ratings, type ratings and additional training endorsements.

## Information needed to complete this form

Provide your details, the name of the Part 141/142 operator that you are engaged by and the name of your Head of Operations.

## Aviation Reference Number (ARN)

An ARN is required to complete this form. If you do not have an ARN, [apply now](#).

If you are applying on behalf of an organisation, you will need to have authority to act on the entity's (applicant's) behalf and be able to provide the organisation's ARN.

## Contact details

It is important the contact details on the ARN profile are current. CASA uses these contact details when processing this application.

If your address, contact or other details have changed, you must update them prior to lodging this form. You can do this by [changing your details](#) on the CASA website.

Failure to provide up to date contact details to CASA could result in additional fees being charged under the *Civil Aviation (Fees) Regulations 1995* and may constitute a criminal offence.

## For more information

Go to the [CASA website](#) or [contact us](#).

## Applicant

### 1 What are the **applicant** details?

Your contact details must be current. Update contact details via [changing your details](#).

Legal entity/full name

Applicant ARN

Phone number

Email address

### 2 What are the **organisation details** of the operator that you are engaged by?

Legal entity/full name

Organisation ARN

## Contact person

### 3 What are the **Head of Operations (HOO)** details?

Legal entity/full name

Head of Operations ARN

### 4 Have you completed FERC eLearning modules 1 to 6?

**No** You will be enrolled into the eLearning

**Yes** A FERC workbook template will be sent to you by email

*This area has been intentionally left blank*

**5 I declare:**

- All statements in this application are true and correct.

I acknowledge by providing my details below and submitting this application:

- This satisfies the requirement for me to sign this application
- I may commit an offence under the *Criminal Code Act 1995* if I make a false or misleading statement in my application.
- We may also use your licensing information in deidentified form for aviation safety research/analysis.

**Privacy**

Any personal information you provide to CASA, as part of this application, is protected by the *Privacy Act 1988*.

We will use the information provided to process this application and may also use it to conduct identity/security checks. Without your consent, we may not be able to process your application.

To meet our accountability obligations, we may disclose this information:

- to other government agencies or other national aviation authorities for certain purposes, and
- to comply with court orders and other legal requirements.

For more information about how we use, disclose and protect your personal information, see our [privacy statement](#) and [privacy policy](#).

**Fees**

I accept if this application is withdrawn or refused by CASA, or if CASA is unable to assess this application because I have failed to provide the required information and/or documentation, I am liable to pay CASA fees for work conducted.

- I declare and acknowledge the above matters.
- I consent to CASA using my licensing information and other personal information for the above purposes.
- I have read CASA's privacy policy and I authorise CASA to use and disclose the information it collects for this application in accordance with that policy.

Full name

Date (DD/MM/YYYY)

/ /

**Submitting this form to CASA**

**Choose one option only**



By email – send this form with all supporting documents attached to [flighttesting@casa.gov.au](mailto:flighttesting@casa.gov.au)



By post – return this form and all supporting documents to:

**CASA Flight Testing Office**  
**GPO Box 2005**  
**Canberra ACT 2601**

↓ [Continue to payment page](#)



### 6 Application fees

Select **only one** option below

Approval for grade 1 training endorsement holder (including FERC eLearning)

**Fee Code: 24.17.....\$220**

Approval for grade 1 training endorsement holder (FERC eLearning completed)

**Fee Code: 24.17.....\$160**

**Total:**

### 7 Payment options

**OPTION 1** Online payment

#### Make a secure payment online >

Online payments are more secure and also enable CASA to process your request faster. To make a payment go to [Secure payment gateway](#). After making a payment, enter the online receipt number below.

Provide the online receipt number below:

**OPTION 2** Credit card

I hereby authorise the Civil Aviation Safety Authority to **debit** the following amount from:

Mastercard          Visa          Total \$

Card number

Expiry (MM/YY)

/

Cardholder name

Signature

Date (DD/MM/YYYY)

/

/

**Receipt options**    Applicant    **or**    Third party (provide details below)

**Details of third party**

ARN (If applicable)

Email

Legal Entity/ Full name

Phone number