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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 FCL.exams@casa.gov.au.

Purpose of this form

Use this form to apply to be the principal PEXO exam Registrar and Invigilator for a flying school or training organisation.

Who is this form for?

This form should be completed by the Head of Operations (HOO) of a flying school or training organisation when they want to initially commence conducting PEXO exams or want to conduct PEXO exams at a new location.

Information needed to complete this form

The approval requested must be appropriate for the training conducted under the company training Air Operator's Certificate (AOC) or training Approval Certificate.

The HOO is responsible for the overall management of the conduct of PEXO exams and the management of all Registrars and Invigilators at the flying school/training organisation.

The HOO of the flying school or training organisation is responsible for notifying CASA of any change to the contact details of the organisation or the individuals who are approved to administer PEXO exams. All correspondence regarding PEXO exams will be sent to the current contact details, according to CASA's records.

If the HOO ceases to be employed by the flying school/training organisation, they must advise CASA.

If additional Registrar(s) and/or Invigilator(s) are required, please complete, [Additional PEXO exam Registrar and/or Invigilator \(Form 1355\)](#) for each additional individual.

Aviation Reference Number (ARN)

An ARN is required to complete this form.

If you are the applicant and you do not have an ARN, [apply now](#).

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 online using [changing your details](#) prior to lodging this form.

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

ARN

Date of birth (DD/MM/YYYY)

/ /

Phone number

Email address

2 What are you **applying** for (select one)?

New HOO for an **existing** organisation → **Go to 3**

New HOO and **new** organisation → **Go to 4**

New location for an **existing** organisation → **Go to 4**

3 What are the details of the **previous HOO**?

Full name of previous HOO

ARN of previous HOO

4 As the HOO I wish to conduct PEXO exams for the following flying school/training organisation

Name of school/organisation

ARN of school/organisation (for billing purposes)

Phone number of school/organisation

Email address of school/organisation

Company training AOC or approval certificate number

Date of issue (DD/MM/YYYY)

/ /

Owner of Billing ARN (select one)

Self

Company

Address of exam venue

5 Unit/number

Street name

Suburb

State/territory

Postcode

6 Which exams are you requesting?

Exams requested need to be relevant to the training approved for the organisation.

Recreational Pilot Licence Aeroplane (RPLA)

Recreational Pilot Licence Helicopter (RPLH)

Recreational Pilot Licence Navigation (RPLN)

Private Pilot Licence Aeroplane (PPLA)

Private Pilot Licence Helicopter (PPLH)

Private IFR Rating (PIFR)

Private Pilot (Balloon) Permit (PP(B)P)

Applicant declaration

7 I declare:

- All statements in this application are true and correct.
- As principal PEXO officer for this organisation, I agree to abide by the terms and conditions required by CASA in relation to the conduct and supervision of PEXO exams.
- In the event that I become aware of any impropriety occurring during the conduct of an examination, I will immediately contact Flight Crew Licensing for advice.
- I will ensure that all PEXO exams are conducted in accordance with the requirements specified in the 'CASA-PEXO Registrars & Invigilators Handbook'.

I acknowledge by providing my details below and submitting 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](#).

- 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.

Name

Date (DD/MM/YYYY)

/ /

In what capacity are you making this declaration?

Self

Director


Agent

Executor

Other, please specify:

7 continued

An authority **must** be provided if the person making this declaration is **not** the individual or an office holder of the entity named in question 7.

 Provide authority

CASA FOI Recommendation

This section **must be completed** prior to submission to FCL.

8 The training approved for this organisation includes:

Aeroplane
Helicopter
Balloon
VFR Training
Instrument Training

9 I have completed a physical inspection of the proposed 'exam facility' at the above address and am satisfied that the following points have been considered

Adequate safety for the occupants (ohs)
Adequate lighting
Adequate ventilation and heating/cooling
An environment free from unacceptable noise levels, distractions and non-exam activity
Access to the room(s) may be controlled whilst exams are in progress
A separate desk for each candidate, but not smaller than 1350 x 750 mm
A minimum of 1.5m between the sides of any adjacent monitors
Each individual computer has a uninterruptible power supply (UPS)
Have flat screen (non-CRT) monitors at least 15-inch in screen size
Comfortable seating for candidates
Clean toilet facilities nearby
Table and chair for the supervisor
General security aspects are satisfactory

If not satisfactory, state reason:

Application recommended

Application not recommended (specify below)

9 continued



Provide additional pages if required

FOIs name

ARN

Date (DD/MM/YYYY)

/ /

FCL Exams Section

10 I declare that.

Application recommended

Application not recommended (specify below)



Provide additional pages if required

Date entered into PEXO (DD/MM/YYYY)

/ /

Date instructions sent to applicant (DD/MM/YYYY)

/ /

Full name

ARN

Date (DD/MM/YYYY)

/ /

In what capacity are you making this declaration?

PEXO examiner

PEXO administrator

10 continued

Other, please specify:

Submitting this form to CASA

Choose one option only



By email – send this form with all supporting documents attached to FCL.exams@casa.gov.au



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

CASA Client Services Centre
GPO Box 2005
Canberra ACT 2601