Australian Government
Civil Aviation Safety Authority

Application

Instrument of approval AROC Assessor

Approval or renewal

CASR 64.015

This form is now available online

Use myCASA for reliable and secure form submissions and payments.

Go to **myCASA**

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 applications@casa.gov.au.

Purpose of this form

This form is to be used by individuals seeking to be approved to conduct Aeronautical Radio Operator Certificate (AROC) training and assessments.

This form is also be used to request a renewal of an existing approval.

Who is this form for?

This form is for qualified and/or experienced individuals wishing to conduct AROC training and assessments.

Information needed to complete this form

A separate form is to be completed for each individual.

If you do not have an ARN, apply for an ARN.

Before submitting this form, you must obtain authorisation from fcl.exams@casa.gov.au.

For more information about AROC training and assessments go to the CASA website and CASR 64.015.

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 your contact details via changing your details.

Full name

ARN

Phone number

Email address

2 What are you applying for (select all that apply)?

- ☐ AROC Assessor
- ☐ AROC Trainer
- ☐ AROC Instrument - initial issue
- ☐ AROC Instrument renewal

3 The AROC course I will be using is owned by (name of company or individual)?

Name

ARN (if available)

☐ I have been authorised by the owner to use this AROC course

4 What qualifications or experience do you have to support this application?

Qualifications

Relevant experience

Provide certified copy if required

Authorisation

5 Who in CASA has authorised you to submit this form?

Before submitting this form, you must obtain authorisation from fcl.exams@casa.gov.au.

Full name of CASA authority officer

Date of authorisation (DD/MM/YYYY)

/ /

Application checklist

6 Select all that apply:

- ☐ Certified copies of qualifications are attached
- ☐ CV is attached

If other please specify

This area has been intentionally left blank

Declaration

7 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 applications@casa.gov.au

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

CASA Client Services Centre
GPO Box 2005
Canberra ACT 2601

Continue to payment page

Payment authorisation

ARN

8 Application fees

Select **only one** option below

☐ AROC Instrument of Approval, renewal or an Instrument for an additional person to present a previously approved AROC course -
Fee Code: 24.6 077.....**$200**

Total: 0

9 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 $ 0

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