



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 FCL.exams@casa.gov.au.

Purpose of this form

Use this form to apply to be a Pilot Examination Office (PEXO) Registrar and/or Invigilator.

Who is this form for?

This form should be completed by individual employees of a flying school or training organisation who wish to conduct PEXO exams.

Information needed to complete this form

A separate form is to be completed for each individual applying to be an additional Registrar or Invigilator with a flying school or training organisation.

If the new Registrar or Invigilator is replacing a previously approved person, the name and ARN of the retiring person must be provided.

If you are the HOO and wish to initially commence conducting PEXO exams or commence conducting PEXO exams at a different location, then please complete [CASA Application by HOO of a Flying School to conduct PEXO exams \(Form 1354\)](#).

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.

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](#).

Full name

ARN

Date of birth (DD/MM/YYYY)

/ /

Phone number

Email address

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

A Registrar makes exam bookings, an Invigilator supervises the actual exam.

Registrar/Invigilator replacement ➔ [Go to 3](#)

PEXO Registrar & Invigilator role ➔ [Go to 4](#)

PEXO Registrar role only ➔ [Go to 4](#)

PEXO Invigilator role only ➔ [Go to 4](#)

3 What are the details of any **retiring Registrar/Invigilators**?

Full name

ARN

4 What are the **following flying school/training organisation** details you wish to conduct PEXO exams for?

School/organisation name

ARN for billing purposes

Address of exam venue

Unit/number

Street name

Suburb

State/territory

Postcode

Phone number

Email address where exam booking confirmation is sent

Company Training AOC or Training Certificate number

Date of issue (DD/MM/YYYY)

/ /

5 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)

Application checklist

- 6** Are you attaching any documents to this application?

Applicant declaration

7 I declare:

- All statements in this application are true and correct.
- I agree to abide by the terms and conditions required by CASA in relation to the administration of PEXO exams.
- Excluding the HOO and deputy HOO, PEXO Registrars and Invigilators are not permitted to be involved now, or in the foreseeable future, directly or indirectly engaged in aviation activities such as aeronautical knowledge training or flying training.
- 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 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.

Full name

Date (DD/MM/YYYY)

/ /

7 continued

In what capacity are you making this declaration?

- Self
- Director
- Agent
- Executor
- Other, please specify:

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

HOO recommendation

8 I declare that:

- All statements in this application are true and correct.
- The applicant named in question 1 to be a CASA PEXO exam Registrar and/or Invigilator for my school named in question 4, and certify to the best of my knowledge, that the applicant is:
 - A fit and proper person
 - Not teaching aeronautical knowledge (theory) subjects at the school or elsewhere
- I accept full responsibility for the conduct of the applicant in his/her duties in relation to administration of PEXO exams at my school.
- I undertake to inform CASA (Flight Crew Licensing Section) immediately of any change in status of the applicant e.g. taking up teaching of aeronautical knowledge subjects at the school or elsewhere, leaving employment of the school, or has demonstrated unsuitable behaviour as an examination supervisor.
- I undertake to inform CASA (Flight Crew Licensing Section) immediately when I leave the school, or am no longer serving the school as its HOO.
- I am authorised to make this application and hold the role indicated below.
- The reasons for needing an additional PEXO Registrar and/or Invigilator are as follows:

8 continued

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.

Full name

Date (DD/MM/YYYY)

/ /

In what capacity are you making this declaration?

Self


Director

Agent

Executor

Other, please specify:

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 8.

 Provide authority

FCL Exams Section

9 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

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 Flight Crew Licensing
GPO Box 2005
Canberra ACT 2601