



CASA Stamp:

IMPORTANT INFORMATION FOR APPLICANTS

- 1: Your ADF qualifications must have been assessed by a Maintenance Training Organisation (MTO) before you submit this form. You must obtain a copy of Form 465, completed by the MTO, and submit it with **this** application.
- 2: If you are also applying for Aircraft Type Ratings, based on ADF authorisations, you must submit Form 543 with **this** application.
- 3: If you do not have an ARN, you must submit **Form 1162** (Aviation Reference Number (ARN) Application) including appropriate identification with **this** application. This will satisfy the mandatory requirement for an ARN.
- 4: Payment for this application can be made online. Go to the CASA webpage and click the Payment button. You must attach a copy of the receipt with this application.
- 5: This form can be completed electronically and saved locally to your computer. Once the ARN has been entered into the first page, it will automatically update in the applicant ARN fields on subsequent pages. CASA recommends that applicants complete as much of the form electronically as possible.
- 6: 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 and sections marked with an * are mandatory.**

Applicant Details as per Birth Certificate / Passport:

Title*: _____

Family Name*: _____

Given Names*: _____

Date of Birth*: _____

Applicant ARN:*

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CONTACT DETAILS

You are required to notify of any changes to your personal contact information (refer to [CASR 11.70](#)), information on how to change your contact details is available on CASA website <https://www.casa.gov.au/services/standard-page/changing-your-details>.

All correspondence, including permissions issued as a result of this application, will be sent by email or post to your current contact details according to CASA's records.

Privacy Statement: Any personal information you provide to CASA is protected by the *Privacy Act 1988* (Cth). CASA can only collect, use and disclose that information in accordance with that Act. CASA will use the information collected in this form for purposes associated with performing its functions under the *Civil Aviation Act 1988*, the *Airspace Act 2007*, the *Aviation Transport Security Act 2004* or the regulations made under those Acts. For full details on how CASA collects, protects and uses personal information, please refer to [CASA's Privacy Policy](#).

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Section A: Eligibility Criteria*

1. Proof of Identity

Note: In accordance with CASR Part 11, if you have previously supplied documentation, you are not required to submit it again.

Are you over the age of 18 years?

- ☐ Yes – Please attach a certified true copy of a document demonstrating proof of age, identity and nationality (e.g. Passport or Birth certificate).
- ☐ Yes – Certified true copies of identification previously submitted to CASA. Date submitted: ____/____/____
- ☐ Not Applicable – Applicant already holds a CASA licence.
- ☐ No – Application will be refused. You must be over the age of 18 to apply.

2. Validity of Qualifications

Note: In accordance with Civil Aviation Safety Regulation 66.070, CASA must be satisfied that your authorisations were not cancelled or revoked. Please be sure to provide any documentation that supports this requirement.

Are you still a serving member of the Australian Defence Force?

- ☐ Yes – Please attach a certified true copy of a letter from your Commanding Officer or Engineering Officer providing evidence of the validity of your authorisations.
- ☐ No – Please attach a certified true copy of your discharge certificate.

3. Australian Defence Force Aircraft Authorisations

Have your Defence Force aircraft authorisations been assessed by a Maintenance Training Organisation?

- ☐ Yes – Please attach the following documentation:
- Copy of Form 465 from the approved Maintenance Training Organisation
 - Certified true copy of your Defence Force aircraft authorisations (Record of Training and Employment or equivalent) that provide evidence you have met one of the following requirements in the 2 years immediately before the time of making this application:
 - i You have exercised the privileges for at least 6 months; or
 - ii You have gained at least 6 months additional practical experience.
- ☐ No – Application will be refused. You must be assessed as competent by a Maintenance Training Organisation prior to applying for your licence.

4. Medically Significant Conditions Refer to CASR 66.025(3)(d)

Note: In accordance with CASR Part 11, if you have previously supplied documentation, you are not required to submit it again.

Do you have a medically significant condition (as described in CASR 67.010) that is safety-relevant?

- ☐ Yes – Please attach a report from a medical practitioner that describes the condition.
- ☐ Yes – I have previously submitted documentation to CASA MPL and received acknowledgement of receipt by CASA. Date submitted: ____ / ____ / ____
- ☐ No

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Section B: Application Details *

Type of Application

☐ Initial Licence

☐ Additional Category/subcategory

1. Aircraft Engineer Licence Category

Tick the relevant Category/subcategory for which you are applying.

Note: If you are applying for a Category A or B1, you **MUST** tick the relevant subcategories.

Category	Subcategory			
<input type="checkbox"/> A	<input type="checkbox"/> A1	<input type="checkbox"/> A2	<input type="checkbox"/> A3	<input type="checkbox"/> A4
<input type="checkbox"/> B1	<input type="checkbox"/> B1.1	<input type="checkbox"/> B1.2	<input type="checkbox"/> B1.3	<input type="checkbox"/> B1.4
<input type="checkbox"/> B2				

2. Aircraft Type Ratings

Are you applying for Aircraft Type Ratings based on ADF qualifications within the Category or Categories specified above?

☐ Yes – You must submit *Form 543 Application for Aircraft Type Ratings on a CASR Part 66 Licence Assessment of ADF Qualifications* with **this** form.

☐ No

Section C: Applicant Checklist * Enter 'Y' or 'N' in applicable boxes

	I hold an Aviation Reference Number (ARN) or application Form 1162 and appropriate ID included
	Certified true copy of proof of age, identity and nationality attached OR Proof previously submitted
	Certified true copies of ADF discharge certificate attached OR Certified true copy of letter from CO/EO attached
	Copy of Form 465 specifying qualifications, experience and English Language competencies attached.
	Certified true copies of ADF Authorisations (Record of Training and employment) attached
	Report from medical practitioner detailing all medically significant conditions attached OR Not applicable
	Application form signed and fully completed (including ARN entered on each page)
	Payment made online and receipt attached OR Payment Authorisation completed (cheque or money order attached if applicable)

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 regulatory references included in 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 [CASA's Privacy Policy](#)). 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* (Cth).

Signature: _____

Date: ____ / ____ / ____

Application for Initial Licence/Additional Category or
Subcategory on CASR Part 66 Licence
ADF Qualifications

ARN:

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Payment Authorisation

Application Fees*

Fee Code	Description	Total
<input type="checkbox"/> 2.35	Recognition of current Australian Defence Force aircraft authorisations, based on assessment by MTO — processing and consideration of application	\$ 65
<input type="checkbox"/> 2.36	Recognition of expired Australian Defence Force aircraft authorisations, based on assessment by MTO — processing and consideration of application	\$ 65
Total Cost:		\$ _____

Payment Options *

☐ Payment made [online](#) Receipt No: _____ (CASA preferred option)

Attach printed receipt and do not complete remainder of this page

☐ I have enclosed a Cheque or Australian Money Order (please make cheques payable to CASA)

☐ I am paying by credit card (provide details below)

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"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																Expiry Date:	____ / ____
Card Holder Name (please print):		Total: \$ _____															
Signature:	Date: ____ / ____ / ____																	

Receipt Options *

Send receipt to:

☐ Applicant OR ☐ Third party (provide details below)

Details of Third Party

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

Submit the Payment Authorisation Form (and Cheque / Money Order / Purchase Order) with the Application Form.

- **Email** ame.licensing@casa.gov.au
- **Mail to:** CASA Licensing and Registration Centre
CASA
GPO Box 2005
CANBERRA ACT 2601
- **Fax to:** 1300 737 187

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Receipt No:		Initial:	
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