



# Issue of CASR Part 61 Instructor or Instrument Rating for ADF

CASR 61.285

## Purpose of this form

This form is to be used to notify CASA of the issue of an Flight Instructor or Instrument Rating under CASR Part 61 for current or former ADF members.

## Who is this form for?

This form is to be used to notify CASA of the issue of an Flight Instructor or Instrument Rating under CASR Part 61 for current or former ADF members, who have previously applied for the Operational Ratings that were recognised via the '[Flight Crew Licence Application on the basis of ADF Qualifications](#)' (Form 61-1ADF).

## Information needed to complete this form

The applicant must already hold an Australian civil flight crew licence. '[Flight Crew Licence Application on the basis of ADF Qualifications](#)' (Form 61-1ADF) is to be used to request an Australian Civil Flight Crew Licence on the Basis of ADF Qualifications. Members and former members of the ADF are taken to have met some, but not all, requirements for the issue of an Australian civil Instrument or Flight Instructor Rating by virtue of holding an ADF issued qualification.

Applicants with ADF qualifications will have previously been assessed by CASA to ensure they meet the requirements for issue of the rating and advised of this in writing. This letter must be presented to the CASR Part 141 or 142 organisation. The rating can be issued on successful completion of the flight test.



**We recommend using Adobe Acrobat to complete this form to ensure your information is saved correctly**

## Filling in this form

This form can be completed as a **fillable form**:

- Adobe Reader is available free of charge from the [Adobe website](#)
- use 'tab' or 'mouse click' to navigate through the form

If **printing** this form:

- use black or blue pen and print in BLOCK LETTERS
- mark check boxes with a ✓ or a ✕

## Aviation Reference Number (ARN)

An ARN is an identifier that is similar to an account or customer number. You will need an ARN to complete this form.

If you do not have an ARN, [apply for an ARN](#).

## Contact details

CASA will use the currently held contact details linked to your ARN profile.

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.

## Privacy

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 civil aviation legislation and other Australian laws.

For full details on how CASA collects, protects and uses personal information, please refer to [CASA Privacy Policy](#).

## For more information

Go to the [CASA website](#) or call us on 131 757.

## Notifier

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

If your address, contact or other details have changed, you must update them using [changing your details](#).

Full name

ARN

Contact number

Email address

### 2 Does the pilot already hold a CASR Part 61 licence document?

**No** CASR Part 61 licence document will be sent to the pilot as a result of this notification. The pilot must submit '[Recognition and Transfer CAR Part 5 Qualifications](#)' (Form 61-9TX) with this form. The pilot may also need to submit '[Lodgement of current photo with CASA](#)' (Form 61-9PIC).

**Yes** If a licence reprint is required, please submit [Licence Reprint](#)

### 3 Is this form being submitted with another application/ notification?

**No**

**Yes**

Please specify

## Applicant checklist (Pre-flight test)

### 4 Select all that apply:

I hold a CASA Flight Crew Licence appropriate for the issue of the Operational Rating

I hold or have held an ADF (CASR 61.285 (a)) Instrument Rating deemed by CASA as an equivalent

I hold or have held an ADF (CASR 61.285 (a)) Instructor Rating deemed by CASA as an equivalent

I have provided the Flight Examiner with the CASA letter deeming my qualifications to be equivalent to the requirements for the issue of the rating

I have passed the aeronautical knowledge examination (Instrument Rating only)

If other please specify

## Applicant declaration (Pre-flight test)

### 5 I declare that:

- All statements in this notice are true and correct in every particular and that I have read and understood all provisions of the Civil Aviation Safety Regulations 1998 which are relevant to this notice.
- I understand CASA will use the currently held details to process this notice and it is my responsibility to ensure my details are correct prior to lodgement.
- I consent to CASA using and disclosing my personal information in accordance with [CASA Privacy Policy](#) including exchanging the information with Commonwealth, State and Territory government agencies.
- I acknowledge CASA will provide a fee estimate, which will be sent to the contact for this notice.
- I accept that if this notice is withdrawn or refused by CASA, or if CASA are unable to assess the notice because I have failed to provide the required information, I am liable to pay CASA fees for work conducted.
- I have attached all required documentation specified in the notification checklist.
- I acknowledge that to knowingly make a false or misleading statement in this notice is an offence against the [Criminal Code Act 1995 \(Cth\)](#).

Full name

Signature

Date (DD/MM/YYYY)

/ /

## Flight Examiner checklist (Pre-flight test)

6 Select all that apply:

I have sighted the CASA letter that deems the applicant's qualifications to be equivalent to requirements for the issue of the rating being sought

Applicant has passed the aeronautical knowledge examination (Instrument Rating only)

Applicant holds as a minimum, a valid recreational aviation medical practitioner's certificate CASR 61.1300(5)

## Flight Examiner declaration (Pre-flight test)

7 I declare that:

- All statements in this notice are true and correct in every particular and that I have read and understood all provisions of the Civil Aviation Safety Regulations 1998 which are relevant to this notice.
- I understand CASA will use the currently held details to process this notice and it is my responsibility to ensure my details are correct prior to lodgement.
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Full name

ARN

Signature

Date (DD/MM/YYYY)

/ /

## Rating and endorsements issued (Post-flight test)

8 What are the **Operational Rating** and **endorsements** to be issued?

Instrument Rating

Flight Instructor Rating

What are your the endorsements issued?

Flight Examiners cannot write on the Part 61 FCL if they are issuing a FIR or IR based off ADF recognition.

Endorsements issued

9 What are the **NAV AIDS** details (for Instrument Rating only)?

IAP2D

IAP3D

Name of approaches flown

10 What are the **category of aircraft/class or type** details?

Refer to the latest edition of the 'Part 61 prescription of Aircraft and Ratings – CASR Part 61' instrument

**Aeroplane**

**Simulator**

Single engine class

Multi engine class

Type rating

**Helicopter**

**Simulator**

Single engine class

Type rating

## Aircraft details

### 11 What are the **aircraft registration** details?

Registration mark (VH-)

Manufacturer

Model

Serial number

Simulator ID number

## Flight Examiner checklist (Post-flight test)

### 12 Select all that apply:

Flight Test page is attached

If other please specify

## Flight Examiner declaration (Post-flight test)

### 13 I declare that:

- All statements in this notice are true and correct in every particular and that I have read and understood all provisions of the Civil Aviation Safety Regulations 1998 which are relevant to this notice.
- I understand CASA will use the currently held details to process this notice and it is my responsibility to ensure my details are correct prior to lodgement.
- I consent to CASA using and disclosing my personal information in accordance with [CASA Privacy Policy](#) including exchanging the information with Commonwealth, State and Territory government agencies.
- I have attached all required documentation specified in the notification checklist.
- I acknowledge that to knowingly make a false or misleading statement in this notice is an offence against the [Criminal Code Act 1995 \(Cth\)](#).

Full name

ARN

Signature

Date (DD/MM/YYYY)

/ /

## Returning your form



By email – attach this form and all supporting documents. Send them to [applications@casa.gov.au](mailto:applications@casa.gov.au)



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

**CASA Client Services Centre**  
**GPO Box 2005**  
**Canberra ACT 2601**