



CASA Stamp:

**IMPORTANT INFORMATION FOR APPLICANTS**

1: **Before** you can be certified to undertake a flight test, you must have:

- completed and submitted Form 61-4A and completed payment
- had your licence verified by CASA
- completed the required aeronautical knowledge exams
- **a letter from CASA** indicating that your qualifications have been assessed and recognised and that you are approved to take qualifications to a 141 or 142 organisation for assessment of competencies.

2: This form must be submitted after the successful completion of a CPL, ATPL or MPL flight test and any flight test(s) for operational ratings, if applicable.

3: 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.

4: 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 will 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**

**Note:** You are required to notify CASA of any changes to your personal contact information (refer to CASR 11.070). Correspondence, including permissions issued as a result of this application, will be sent by post to the current postal address according to CASA's records.

You should notify CASA of any changes using one of the following methods:

- Log onto the CASA Self Service Portal <https://portal.casa.gov.au/selfservice/>
- Submit Online Change of Details form <https://portal.casa.gov.au/casaforms/addrchange.htm>

**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 Space 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](#).

**Application Type\*:**

- CPL(A)       CPL(H)       ATPL(A)       ATPL(H)       MPL(A)

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**Part 1: Licence Flight Test**

**Section A: Applicant Pre-Flight Test Checklists\***

**Medical Details** Refer to Instrument CASR 61.1300(3)(b)

Class 1 Medical

Place of Medical Examination	Date of Examination* ____ / ____ / ____	Expiry Date of Medical* ____ / ____ / ____	Doctor's Name
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Complete the checklist for the licence level sought

**Commercial Pilot Licence Applicants – All Categories**

<input type="checkbox"/>	CASA has verified my overseas licence and I have received the letter from CASA
<input type="checkbox"/>	I have passes in the aeronautical knowledge examinations required by CASA – evidence attached
<input type="checkbox"/>	I have met the competencies for the grant of the licence CASR 61.275(1)(e)(i)
<input type="checkbox"/>	I hold at least a current ICAO level 4 English Language Proficiency Assessment CASR 61.235(2)(a)(v)
<input type="checkbox"/>	I have met the minimum aeronautical experience requirements

**Air Transport Pilot Licence Applicants – All Categories**

<input type="checkbox"/>	CASA has verified my overseas licence and I have received the letter from CASA
<input type="checkbox"/>	I have passes in the aeronautical knowledge examinations required by CASA – evidence attached
<input type="checkbox"/>	I have met the competencies for the grant of the licence CASR 61.275(1)(e)(i)
<input type="checkbox"/>	I hold at least a current ICAO level 4 English Language Proficiency Assessment CASR 61.235(2)(a)(v)
<input type="checkbox"/>	I have met the minimum aeronautical experience requirements

**Multi Crew Pilot Licence Applicants – Aeroplane Only**

<input type="checkbox"/>	CASA has verified my overseas licence and I have received the letter from CASA
<input type="checkbox"/>	I have passes in the aeronautical knowledge examinations required by CASA – evidence attached
<input type="checkbox"/>	I have met the competencies for the grant of the licence CASR 61.275(1)(e)(i)
<input type="checkbox"/>	I hold at least a current ICAO level 4 English Language Proficiency Assessment CASR 61.235(2)(a)(v)
<input type="checkbox"/>	I have met the minimum aeronautical experience requirements

**Section B: 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 or misleading statement is an offence against the *Criminal Code Act 1995* (Cth).

I authorise CASA to send a copy of all communications regarding THIS application to:

Name: \_\_\_\_\_ email: \_\_\_\_\_

Signature: _____	Date: ____ / ____ / ____
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**Section C: Certification by Person under CASR 61.235 (5)\* Complete prior to flight test**

Training Organisation:													
I certify that the applicant has complied with the following:													
<input type="checkbox"/> I have sighted the letter sent to the applicant from CASA													
<input type="checkbox"/> Applicant will be at least the minimum age required for the issue of the licence at the time of the flight test – (CASR 61.580, CASR 61.700, CASR 61.655)													
<input type="checkbox"/> Applicant passed the relevant aeronautical knowledge examinations – CASR 61.275 (1)(f) / (3)(d)													
<input type="checkbox"/> Applicant has the minimum aeronautical experience for the issue of the licence set out in CASR 61													
<input type="checkbox"/> Applicant has a current level 4 or above English Language Proficiency Assessment, CASR 61.235(2)(a)(v)													
<input type="checkbox"/> Applicant is competent in each unit of competency mentioned in the CASR Part 61 Manual of Standards for that licence.													
I certify him/her for a <input type="checkbox"/> CPL(A) <input type="checkbox"/> CPL(H) <input type="checkbox"/> ATPL(A) <input type="checkbox"/> ATPL(H) <input type="checkbox"/> MPL(A) flight test.													
Signature of Person	Date ____ / ____ / ____	Printed Name	ARN Person <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr></table>										

**Section D: Declaration of the Flight Examiner \***

**1. Class or Type Rating**

Specify the class or type of aircraft in which the flight test was conducted.

Single Engine Class Rating  Multi Engine Class Rating  Type Rating\*: \_\_\_\_\_

\* Use type designator from the "Prescribed aircraft, ratings and variants for CASR Part 61 Instrument 2014".

**2. Design Feature Endorsements – to be issued on the licence**

Specify the design features applicable to the aircraft in which the flight test was conducted, if not already held.

<input type="checkbox"/> Tailwheel Undercarriage	<input type="checkbox"/> Pressurisation System	<input type="checkbox"/> Gas Turbine Engine
<input type="checkbox"/> Retractable Undercarriage	<input type="checkbox"/> Floatplane	<input type="checkbox"/> Multi Engine Centreline Thrust
<input type="checkbox"/> Manual Propeller Pitch Control	<input type="checkbox"/> Floating Hull	<input type="checkbox"/> Ski Landing Gear

I certify that I conducted a flight test in accordance with the Part 61 Manual of Standards where the:													
<input type="checkbox"/> Applicant was at least the minimum age required for the issue of the licence at the time of the flight test – (CASR 61.580, CASR 61.700, CASR 61.655)													
<input type="checkbox"/> Applicant passed the relevant aeronautical knowledge examinations – CASR 61.275													
<input type="checkbox"/> Applicant satisfied me that he/she has sufficient knowledge in any competency standard mentioned in the KDR to safely exercise the privileges of the licence, where a pass in the aeronautical exam sat after 1 November 1998, is less than 100%													
<input type="checkbox"/> Applicant had the minimum aeronautical experience for the issue of the licence set out in CASR 61.655, CASR 61.580 or CASR 61.700.													
<input type="checkbox"/> Applicant had a current level 4 or above English Language Proficiency Assessment, CASR 61.235(2)(a)(v) or assessment report attached													
<input type="checkbox"/> Applicant held a CASA class 1 medical certificate at the time of the flight test – CASR 61.1300(3)(b)													
<input type="checkbox"/> Aircraft was suitable for a <input type="checkbox"/> CPL(A) <input type="checkbox"/> CPL(H) <input type="checkbox"/> ATPL(A) <input type="checkbox"/> ATPL(H) <input type="checkbox"/> MPL(A) flight test - CASR 61.245 and Part 61 MOS													
<input type="checkbox"/> Applicant demonstrated a standard that met the standards specified in the Part 61 Manual of Standards for the licence/category level sought													
<i>Note flight test reports for failed flight tests must be attached if not already submitted.</i>													
Signature of Flight Examiner	Date ____ / ____ / ____	Printed Name	ARN Flight Examiner <table border="1" style="width: 100%; height: 20px;"><tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr></table>										

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**Part 2: Operational Rating Flight Test**

Complete this Part if an operational rating is to be added to the Australian civil licence, on the basis of ratings held on the overseas licence.

**Section A: Pre-Flight Test Declarations\***

**1. Person under CASR 61.235(5)**

<input type="checkbox"/>	I have sighted the letter sent to the applicant from CASA												
<input type="checkbox"/>	Applicant has the aeronautical experience required for the issue of the rating and endorsement(s)												
<input type="checkbox"/>	Applicant is competent in each unit of competency mentioned in the Part 61 Manual of Standards												
<input type="checkbox"/>	Applicant has passed the aeronautical knowledge examination CASR 61.235(2) <b>OR</b>												
<input type="checkbox"/>	Not applicable												
<input type="checkbox"/>	Applicant holds a medical as per CASR 61.1300(5)(b)												
<input type="checkbox"/>	Not applicable (flight test in a SIM)												
Signature		Date ____ / ____ / ____	Printed Name										
			ARN <table border="1"> <tr> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> </tr> </table>										

**2. Flight Examiner**

<input type="checkbox"/>	Applicant holds a licence appropriate for the issue of the operational rating												
<input type="checkbox"/>	Applicant has passed the aeronautical knowledge examination <b>OR</b>												
<input type="checkbox"/>	Not applicable												
<input type="checkbox"/>	Applicant has met the aeronautical experience requirements for the rating and endorsement												
<input type="checkbox"/>	Applicant holds a medical as per CASR 61.1300(5)(b)												
<input type="checkbox"/>	Not applicable (flight test in a SIM)												
Signature		Date ____ / ____ / ____	Printed Name										
			ARN <table border="1"> <tr> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> </tr> </table>										

**Section B: Rating and Endorsements to be Issued (Post Flight Test)\***

**1. Operational Rating Issued (tick relevant rating):**

<input type="checkbox"/>	Instrument Rating	<input type="checkbox"/>	Night VFR Rating	<input type="checkbox"/>	Low Level Rating
<input type="checkbox"/>	Flight Instructor Rating	<input type="checkbox"/>	Night Vision Imaging System Rating	<input type="checkbox"/>	Aerial Application Rating
<input type="checkbox"/>	Simulator Instructor Rating				

Endorsements Issued: (List endorsements using same abbreviations as entered on licence, 1 per Box)


**2. Category of Aircraft / Class or Type Used for Flight Test**

<input type="checkbox"/> <b>Aeroplane</b> <input type="checkbox"/> <b>Simulator</b>		<input type="checkbox"/> <b>Helicopter</b> <input type="checkbox"/> <b>Simulator</b>	
<input type="checkbox"/>	Single Engine Class	<input type="checkbox"/>	Single Engine Class
<input type="checkbox"/>	Multi Engine Class	<input type="checkbox"/>	Type Rating*:
<input type="checkbox"/>	Type Rating*:		

\* Use type designator from the "Prescribed aircraft, ratings and variants for CASR Part 61 Instrument 2014".

**Aircraft Make/Model:**

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**Aircraft Registration:** VH- \_\_\_\_\_

**Simulator ID Number:**

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**Section C: Declaration of Flight Examiner\***

<input type="checkbox"/>	Applicant held a medical as per CASR 61.1300(5)(b)												
<input type="checkbox"/>	Not applicable (flight test in a SIM)												
<input type="checkbox"/>	Flight Test page attached												
Signature	Date ____ / ____ / ____	Printed Name	ARN <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>										

Submit to CASA by:

- Email: [clarc@casa.gov.au](mailto:clarc@casa.gov.au)
- Mail: CASA Licensing and Registration Centre  
CASA  
GPO Box 2005  
CANBERRA ACT 2601
- Fax: 1300 737 187