



DESIGNATED REPRESENTATIVE APPLICATION & CHECKLIST

Formal application for persons applying for designation to accomplish functions on behalf of the CAA-B and cover page for any other documents necessary to the process.

A. DESIGNEE PERSONAL INFORMATION:

1. PEL NUMBER <i>(Leave blank if number not yet assigned.)</i>		2. NAME (First, Middle, Last, Suffix)				
3. TELEPHONE <i>(Cell/Home/Fax)</i>			4. PERMANENT ADDRESS <i>(Street or PO Box Number)</i>			
5. E-MAIL ADDRESS			6. CITY/STATE/COUNTRY/POSTAL CODE			
7. DATE OF BIRTH <i>(dd/mm/yyyy)</i>	8. HEIGHT In	9. WEIGHT Lbs	10. HAIR	11. EYES	12. SEX	13. NATIONALITY <i>(CITIZENSHIP)</i>

B. SUBMISSION & SPONSORING COMPANY? *(A sponsoring company is only required for "organizational" designees.)*

1. DATE OF SUBMISSION <i>(dd/mm/yyyy)</i>	2. SPONSORING COMPANY
---	-----------------------

C. PURPOSE OF APPLICATION:

Initial Designation Renewal of Designation

1. <input type="checkbox"/> Pilot Examiner	10. <input type="checkbox"/> Aviation Medical Assessor
2. <input type="checkbox"/> Flight Crew Check Airman	11. <input type="checkbox"/> Language Proficiency Examiner
3. <input type="checkbox"/> Flight Engineer Examiner	12. <input type="checkbox"/> Maintenance Engineer Examiner
4. <input type="checkbox"/> Flight Dispatcher Examiner	13. <input type="checkbox"/> Airworthiness Representative
5. <input type="checkbox"/> Flight Dispatcher Check Airman	14. <input type="checkbox"/> Maintenance Representative
6. <input type="checkbox"/> Cabin Crew Check Airman	15. <input type="checkbox"/> Engineering Representative
7. <input type="checkbox"/> Knowledge Testing Examiner	16. <input type="checkbox"/> Air Traffic Examiner
8. <input type="checkbox"/> Operations Representative	17. <input type="checkbox"/> Air Traffic Representative
9. <input type="checkbox"/> Aviation Medical Examiner	18. <input type="checkbox"/> Parachute Rigger Examiner
19. <input type="checkbox"/> Other Designation (explain)	

D. DESIGNEE BUSINESS ADDRESS:

--

E. RESUME:

(Is a resume or curriculum vitae attached that outlines in ascending chronological order the job/positions/experience that are related to the designation sought?)

1. <input type="checkbox"/> YES	2. <input type="checkbox"/> NO	3. <input type="checkbox"/> NOT APPLICABLE
---------------------------------	--------------------------------	--

F. RELATED FORMAL TRAINING:

(For initial designation, a listing of related formal training related to the designation sought is attached and arranged in ascending chronological order?)

1. <input type="checkbox"/> YES	2. <input type="checkbox"/> NO	3. <input type="checkbox"/> NOT APPLICABLE
---------------------------------	--------------------------------	--

G. CHRONOLOGICAL SUMMARY OF CAA FUNCTIONS PERFORMED:

(For renewal of a designation, a listing of related formal training attached that is related to the designation sought and arranged in descending chronological order?)

1. <input type="checkbox"/> YES	2. <input type="checkbox"/> NO	3. <input type="checkbox"/> NOT APPLICABLE
---------------------------------	--------------------------------	--

H. PERCEIVED NEED? *(State the perceived need that the designation would alleviate.)*

I. PROPOSED FUNCTIONS? *(State the functions that are requested.)*

J. VALIDATION? *(Is this designation to be based on another CAA's designation and is a copy of that designation attached?)*

1. YES

2. NO

3. NOT APPLICABLE

4. If YES include the designation number and related CAA phone and fax numbers:

K. APPLICANT CERTIFICATION: *I certify that this application and all accompanying documents contain true and correct entries.)*

Signature

Date *(dd/mm/yyyy)*

Printed Name

L. DECISION: *The decision of the CAA-B Evaluation Panel is...*

1. ACCEPTABLE FOR PROCESSING

2. QUALIFICATION CONCERNS

3. NEED NOT ESTABLISHED

Panel Member 1

Panel Member 2

Panel Member 3

M. FUNCTIONS AUTHORIZED: *(The CAA-B evaluation panel has decided that the following functions that should be authorized.)*

N. LIMITATIONS: *(The CAA-B evaluation panel has decided that the following limitations should be included.)*