



EASA
European Aviation Safety Agency



PART-ARA

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Disclaimer

This version has been prepared by the Agency in order to provide stakeholders with an updated and easy-to-read publication. It has been prepared by combining the officially published texts of the corresponding regulations together with the Acceptable Means of Compliance and Guidance Material (including the amendments) adopted so far. However, this is not an official publication and the Agency accepts no liability for damage of any kind resulting from the risks inherent in the use of this document.

This document will be updated regularly if needed to take into account further amendments.

The format of this document has been adjusted in order to make it easier to read and for reference purposes. Readers are invited and encouraged to report to fcl.easa.europa.eu any perceived errors, or comments relating to this publication.

Consolidated version

Subpart	Version
Subpart GEN	V1, June 2016
Subpart FCL	V1, June 2016
Subpart CC	V1, June 2016
Subpart AeMC	V1, June 2016
Subpart MED	V1, June 2016
Subpart ATO	V1, June 2016
Subpart FSTD	V1, June 2016
Appendices	V1, June 2016

Amendments

Commission Regulations (Implementing rules)

Regulation (EU)	Date
2016/539	07/04/2016
2015/445	17/03/2015
245/2014	13/03/2014
70/2014	27/01/2014
290/2012	30/03/2012
1178/2011	03/11/2011

EASA Decisions (AMC & GM)

Amendment	Date
Amdt 3	15/04/2015
Amdt 2	02/04/2014
Amdt 1	16/04/2013
Part-ORA	19/04/2012

SUBPART GEN - GENERAL REQUIREMENTS

SECTION I - General

ARA.GEN.105 Definitions

For the purposes of this Part and of Part-ORA, the following definitions apply:

1. "Acceptable Means of Compliance (AMC)" are non-binding standards adopted by the Agency to illustrate means to establish compliance with the Basic Regulation and its Implementing Rules;
2. "Alternative means of compliance" are those that propose an alternative to an existing AMC or those that propose new means to establish compliance with Regulation (EC) No 216/2008 and its Implementing Rules for which no associated AMC have been adopted by the Agency;
3. "Approved training organisation (ATO)" means an organisation qualified for the issue or continuation of an approval to provide training for pilot licences and associated ratings and certificates;
4. "Basic instrument training device model (BITD model)" means a defined hardware and software combination, which has obtained a BITD qualification;
5. "Certification specifications (CS)" are technical standards adopted by the Agency indicating means to show compliance with the Basic Regulation and its Implementing Rules and which can be used by organisation for the purpose of certification;
6. "Flight instructor (FI)" means an instructor with the privileges to provide training in an aircraft, in accordance with Part-FCL;
7. "Flight simulation training device (FSTD)" means a training device which is:
 - (a) in the case of aeroplanes, a full flight simulator (FFS), a flight training device (FTD), a flight and navigation procedures trainer (FNPT), or a basic instrument training device (BITD);
 - (b) in the case of helicopters, a full flight simulator (FFS), a flight training device (FTD) or a flight and navigation procedures trainer (FNPT);
8. "FSTD qualification" means the level of technical ability of an FSTD as defined in the compliance document;
9. "FSTD user" means the organisation or person requesting training, checking or testing through the use of an FSTD to an ATO;
10. "Grounding" means the formal prohibition of an aircraft to take-off and the taking of such steps as are necessary to detain it;
11. "Guidance Material (GM)" means non-binding material developed by the Agency that helps to illustrate the meaning of a requirement or specification and is used to support the interpretation of the Basic Regulation, its Implementing Rules and AMC;
12. "ARO.RAMP" means the Subpart RAMP of Annex II to the Regulation on Air Operations;
13. "Other training device (OTD)" means an aid used for pilot training other than an FSTD that provides for training where a complete flight deck or cockpit environment is not necessary;
14. "Part-ARA" means Annex VI to the Regulation on Civil Aviation Aircrew;
15. "Part-ORO" means Annex III to the Regulation on Air Operations;
16. "Part-CC" means Annex V to the Regulation on Civil Aviation Aircrew;
17. "Part-FCL" means Annex I to the Regulation on Civil Aviation Aircrew;
18. "Part-MED" means Annex IV to the Regulation on Civil Aviation Aircrew;
19. "Part-ORA" means Annex VII to the Regulation on Civil Aviation Aircrew;
20. "Principal place of business" means the head office or registered office of the organisation within which the principal financial functions and operational control of the activities referred to in this Regulation are exercised;
21. "Qualification test guide (QTG)" means a document designed to demonstrate that the performance and handling qualities of an FSTD represent those of the aircraft, class of aeroplane or

type of helicopter, simulated within prescribed limits and that all applicable requirements have been met. The QTG includes both the data of the aircraft, class of aeroplane or type of helicopter and FSTD data used to support the validation.

GM1 ARA.GEN.105 Definitions

The following provides a list of acronyms used throughout this Annex:

(A)	aeroplane
(H)	helicopter
A/C	aircraft
ACAS	airborne collision avoidance system
AeMC	aero-medical centre
ALARP	as low as reasonably practicable
AMC	Acceptable Means of Compliance
AME	aero-medical examiner
APU	auxiliary power unit
ARA	authority requirements for aircrew
ATO	approved training organisation
ATPL	airline transport pilot licence
BITD	basic instrument training device
bpm	beats per minute
CAT	category
CC	cabin crew
cm	centimetres
CPL	commercial pilot licence
CS	Certification Specification
CS-FSTD(A)	Certification Specifications for aeroplane flight simulation training devices
CS-FSTD(H)	Certification Specifications for helicopter flight simulation training devices
dB	decibel
DH	decision height
DPATO	defined point after take-off
DPBL	decision point before landing
EC	European Community
ECG	electrocardiogram
ENT	ear, nose and throat
EOG	electro-oculography
ETOPS	extended range operations with twin-engined aeroplanes
FANS	future air navigation system
FD	flight director
FEV1	forced expiratory volume in 1 second
FFS	full flight simulator
FMECA	failure mode, effects and criticality analysis
FMGC	flight management and guidance computer
FMS	flight management system
FNPT	flight navigation and procedures trainer
FSTD	flight simulation training device
FTD	flight training device
FTE	full time equivalent
ft	feet
FVC	forced vital capacity
GM	Guidance Material

GPS	global positioning system
HF	human factors
Hg	mercury
HUD/HUGS	head-up display / head-up guidance system
Hz	Herz
IATA	International Air Transport Association
ICAO	International Civil Aviation Organisation
IGE	in ground effect
ILS	instrument landing system
IOS	instructor operating station
IR	Implementing Rule
IR	instrument rating
kg	kilogram
LDP	landing decision point
LVTO	low visibility take-off
m	metre
mm	millimetre
OGE	out of ground effect
ORA	organisation requirements for aircrew
ORO	organisation requirements for air operations
OSD	operational suitability data
QTG	qualification test guide
POM	proof of match
ROD	rate of descent
RVR	runway visual range
TDP	take-off decision point
VDR	validation data roadmap

ARA.GEN.115 Oversight documentation

The competent authority shall provide all legislative acts, standards, rules, technical publications and related documents to relevant personnel in order to allow them to perform their tasks and to discharge their responsibilities.

ARA.GEN.120 Means of compliance

(a) The Agency shall develop Acceptable Means of Compliance (AMC) that may be used to establish compliance with Regulation (EC) No 216/2008 and its Implementing Rules. When the AMC are complied with, the related requirements of the Implementing Rules are met.

(b) Alternative means of compliance may be used to establish compliance with the Implementing Rules.

(c) The competent authority shall establish a system to consistently evaluate that all alternative means of compliance used by itself or by organisations and persons under its oversight allow the establishment of compliance with Regulation (EC) No 216/2008 and its Implementing Rules.

(d) The competent authority shall evaluate all alternative means of compliance proposed by an organisation in accordance with ORA.GEN.120 by analysing the documentation provided and, if considered necessary,

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conducting an inspection of the organisation.

When the competent authority finds that the alternative means of compliance are in accordance with the

Implementing Rules, it shall without undue delay:

- (1) notify the applicant that the alternative means of compliance may be implemented and, if applicable, amend the approval or certificate of the applicant accordingly; and
- (2) notify the Agency of their content, including copies of all relevant documentation;
- (3) inform other MS about alternative means of compliance that were accepted.

(e) When the competent authority itself uses alternative means of compliance to achieve compliance with

Regulation (EC) No 216/2008 and its Implementing Rules it shall:

- (1) make them available to all organisations and persons under its oversight; and
- (2) without undue delay notify the Agency.

The competent authority shall provide the Agency with a full description of the alternative means of compliance, including any revisions to procedures that may be relevant, as well as an assessment demonstrating that the Implementing Rules are met.

AMC1 ARA.GEN.120(d)(3) Means of compliance

GENERAL

The information to be provided to other Member States following approval of an alternative means of compliance should contain a reference to the Acceptable Means of Compliance (AMC) to which such means of compliance provides an alternative, as well as a reference to the corresponding Implementing Rule, indicating as applicable the subparagraph(s) covered by the alternative means of compliance.

GM1 ARA.GEN.120 Means of compliance

GENERAL

Alternative means of compliance used by a competent authority or by organisations under its oversight may be used by other competent authorities or organisations only if processed again in accordance with ARA.GEN.120 (d) and (e).

ARA.GEN.125 Information to the Agency

(a) The competent authority shall without undue delay notify the Agency in case of any significant problems with the implementation of Regulation (EC) No 216/2008 and its Implementing Rules.

(b) The competent authority shall provide the Agency with safety-significant information stemming from the occurrence reports it has received.

ARA.GEN.135 Immediate reaction to a safety problem

(a) Without prejudice to Directive 2003/42/EC of the European Parliament and of the Council [1] the competent authority shall implement a system to appropriately collect, analyse and disseminate safety information.

(b) The Agency shall implement a system to appropriately analyse any relevant safety information received and without undue delay provide to Member States and the Commission any information, including recommendations or corrective actions to be taken, necessary for them to react in a timely manner to a safety problem involving products, parts, appliances, persons or organisations subject to Regulation (EC) No 216/2008 and its Implementing Rules.

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(c) Upon receiving the information referred to in (a) and (b), the competent authority shall take adequate measures to address the safety problem.

(d) Measures taken under (c) shall immediately be notified to all persons or organisations which need to comply with them under Regulation (EC) No 216/2008 and its Implementing Rules. The competent authority shall also notify those measures to the Agency and, when combined action is required, the other Member States concerned.

SECTION II - Management

ARA.GEN.200 Management system

(a) The competent authority shall establish and maintain a management system, including as a minimum:

(1) documented policies and procedures to describe its organisation, means and methods to achieve compliance with Regulation (EC) No 216/2008 and its Implementing Rules. The procedures shall be kept up-to-date and serve as the basic working documents within that competent authority for all related tasks;

(2) a sufficient number of personnel to perform its tasks and discharge its responsibilities. Such personnel shall be qualified to perform their allocated tasks and have the necessary knowledge, experience, initial and recurrent training to ensure continuing competence. A system shall be in place to plan the availability of personnel, in order to ensure the proper completion of all tasks;

(3) adequate facilities and office accommodation to perform the allocated tasks;

(4) a function to monitor compliance of the management system with the relevant requirements and adequacy of the procedures including the establishment of an internal audit process and a safety risk management process. Compliance monitoring shall include a feedback system of audit findings to the senior management of the competent authority to ensure implementation of corrective actions as necessary; and

(5) a person or group of persons, ultimately responsible to the senior management of the competent authority for the compliance monitoring function.

(b) The competent authority shall, for each field of activity including management system, appoint one or more persons with the overall responsibility for the management of the relevant task(s).

(c) The competent authority shall establish procedures for participation in a mutual exchange of all necessary information and assistance with other competent authorities concerned including on all findings raised and follow-up actions taken as a result of oversight of persons and organisations exercising activities in the territory of a Member State, but certified by the competent authority of another Member State or the Agency.

(d) A copy of the procedures related to the management system and their amendments shall be made available to the Agency for the purpose of standardisation.

AMC1 ARA.GEN.200(a) Management system

GENERAL

(a) All of the following should be considered when deciding upon the required organisational structure:

(1) the number of certificates, attestations, authorisations and approvals to be issued;

(2) the number of certified persons and organisations exercising an activity within that Member State, including persons or organisations certified by other competent authorities;

(3) the possible use of qualified entities and of resources of other competent authorities to fulfil the continuing oversight obligations;

- (4) the level of civil aviation activity in terms of:
- (i) number and complexity of aircraft operated;
 - (ii) size and complexity of the Member State's aviation industry;
- (5) the potential growth of activities in the field of civil aviation.
- (b) The set-up of the organisational structure should ensure that the various tasks and obligations of the competent authority do not rely solely on individuals. A continuous and undisturbed fulfilment of these tasks and obligations of the competent authority should also be guaranteed in case of illness, accident or leave of individual employees.

GM1 ARA.GEN.200(a) Management system

GENERAL

(a) The competent authority designated by each Member State should be organised in such a way that:

- (1) there is specific and effective management authority in the conduct of all relevant activities;
- (2) the functions and processes described in the applicable requirements of Regulation (EC) No 216/2008¹ and its Implementing Rules and AMCs, Certification Specifications (CSs) and Guidance Material (GM) may be properly implemented;
- (3) the competent authority's organisation and operating procedures for the implementation of the applicable requirements of Regulation (EC) No 216/2008 and its Implementing Rules are properly documented and applied;
- (4) all competent authority personnel involved in the related activities are provided with training where necessary;
- (5) specific and effective provision is made for the communication and interface as necessary with the Agency and the competent authorities of other Member States; and
- (6) all functions related to implementing the applicable requirements are adequately described.

(b) A general policy in respect of activities related to the applicable requirements of Regulation (EC) No 216/2008 and its Implementing Rules should be developed, promoted and implemented by the manager at the highest appropriate level; for example the manager at the top of the functional area of the competent authority that is responsible for such activities.

(c) Appropriate steps should be taken to ensure that the policy is known and understood by all personnel involved, and all necessary steps should be taken to implement and maintain the policy.

(d) The general policy, whilst also satisfying additional national regulatory responsibilities, should in particular take into account:

- (1) the provisions of Regulation (EC) No 216/2008;
- (2) the provisions of the applicable Implementing Rules and their AMCs, CSs and GM;
- (3) the needs of industry; and
- (4) the needs of the Agency and of the competent authority.

(e) The policy should define specific objectives for key elements of the organisation and processes for implementing related activities, including the corresponding control procedures and the measurement of the achieved standard.

¹ Regulation (EC) No 216/2008 of the European Parliament and of the Council of 20 February 2008 on common rules in the field of civil aviation and establishing a European Aviation Safety Agency, and repealing Council Directive 91/670/EEC, Regulation (EC) No 1592/2002 and Directive 2004/36/EC. OJ L 79, 19.3.2008, p. 1.

AMC1 ARA.GEN.200(a)(1) Management system**DOCUMENTED POLICIES AND PROCEDURES**

(a) The various elements of the organisation involved with the activities related to Regulation (EC) No 216/2008 and its Implementing Rules should be documented in order to establish a reference source for the establishment and maintenance of this organisation.

(b) The documented procedures should be established in a way that facilitates their use. They should be clearly identified, kept up-to-date and made readily available to all personnel involved in the related activities.

(c) The documented procedures should cover, as a minimum, all of the following aspects:

- (1) policy and objectives;
- (2) organisational structure;
- (3) responsibilities and associated authority;
- (4) procedures and processes;
- (5) internal and external interfaces;
- (6) internal control procedures;
- (7) training of personnel;
- (8) cross-references to associated documents;
- (9) assistance from other competent authorities or the Agency (where required).

(d) It is likely that the information is held in more than one document or series of documents, and suitable cross-referencing should be provided. For example, organisational structure and job descriptions are not usually in the same documentation as the detailed working procedures. In such cases it is recommended that the documented procedures include an index of cross-references to all such other related information, and the related documentation should be readily available when required.

AMC1 ARA.GEN.200(a)(2) Management system**QUALIFICATION AND TRAINING – GENERAL**

(a) The competent authority should ensure appropriate and adequate training of its personnel to meet the standard that is considered necessary to perform the work. To ensure personnel remain qualified, arrangements should be made for initial and recurrent training as required.

(b) The basic capability of the competent authority's personnel is a matter of recruitment and normal management functions in selection of personnel for particular duties. Moreover, the competent authority should provide training in the basic skills as required for those duties. However, to avoid differences in understanding and interpretation, all personnel should be provided with further training specifically related to Regulation (EC) No 216/2008, its Implementing Rules and related AMCs, CSs and GM, as well as related to the assessment of alternative means of compliance.

(c) The competent authority may provide training through its own training organisation with qualified trainers or through another qualified training source.

(d) When training is not provided through an internal training organisation, adequately experienced and qualified persons may act as trainers, provided their training skills have been assessed. If required, an individual training plan should be established covering specific training skills. Records should be kept of such training and of the assessment, as appropriate.

AMC2 ARA.GEN.200(a)(2) Management system**QUALIFICATION AND TRAINING – INSPECTORS**

(a) Initial training programme:

The initial training programme for inspectors should include, as appropriate to their role, current knowledge, experience and skills in at least all of the following:

- (1) aviation legislation organisation and structure;
- (2) the Chicago Convention, relevant ICAO annexes and documents;
- (3) the applicable requirements and procedures;
- (4) management systems, including auditing, risk assessment and reporting techniques;
- (5) human factors principles;
- (6) rights and obligations of inspecting personnel of the competent authority;
- (7) 'on-the-job' training;
- (8) suitable technical training appropriate to the role and tasks of the inspector, in particular for those areas requiring approvals.

(b) Recurrent training programme:

The recurrent training programme should reflect, at least, changes in aviation legislation and industry. The programme should also cover the specific needs of the inspectors and the competent authority.

GM1 ARA.GEN.200(a)(2) Management system**SUFFICIENT PERSONNEL**

(a) This GM on the determination of the required personnel is limited to the performance of certification and oversight tasks, excluding personnel required to perform tasks subject to any national regulatory requirements.

(b) The elements to be considered when determining required personnel and planning their availability may be divided into quantitative and qualitative elements:

(1) Quantitative elements:

- (i) the estimated number of initial certificates to be issued;
- (ii) the number of organisations certified by the competent authority;
- (iii) the number of persons to whom the competent authority has issued a licence, certificate, rating, authorisation or attestation;
- (iv) the estimated number of persons and organisations exercising their activity within the territory of the Member State and established or residing in another Member State.

(2) Qualitative elements:

- (i) the size, nature and complexity of activities of certified organisations and FSTD qualification certificate holders (cf. AMC1 ORA.GEN.200(b)), taking into account:
 - (A) privileges of the organisation;
 - (B) type of approval, scope of approval, multiple certification;
 - (C) possible certification to industry standards;
 - (D) types of aircraft / flight simulation training devices (FSTDs) operated;
 - (E) number of personnel; and
 - (F) organisational structure, existence of subsidiaries;
- (ii) the safety priorities identified;
- (iii) the results of past oversight activities, including audits, inspections and reviews, in terms of risks and regulatory compliance, taking into account:
 - (A) number and level of findings;
 - (B) timeframe for implementation of corrective actions; and
 - (C) maturity of management systems implemented by organisations and their ability to effectively manage safety risks, taking into account also

- information provided by other competent authorities related to activities in the territory of the Member States concerned; and
- (iv) the size and complexity of the Member State's aviation industry and the potential growth of activities in the field of civil aviation, which may be an indication of the number of new applications and changes to existing certificates to be expected.
- (c) Based on existing data from previous oversight planning cycles and taking into account the situation within the Member State's aviation industry, the competent authority may estimate:
- (1) the standard working time required for processing applications for new certificates (for persons, organisations and FSTD qualification);
 - (2) the number of new certificates to be issued for each planning period; and
 - (3) the number of changes to existing certificates to be processed for each planning period.
- (d) In line with the competent authority's oversight policy, the following planning data should be determined specifically for each type of organisation certified by the competent authority (approved training organisation (ATO) and aero-medical centres (AeMC)) and for FSTD qualification certificate holders:
- (1) standard number of audits to be performed per oversight planning cycle;
 - (2) standard duration of each audit;
 - (3) standard working time for audit preparation, on-site audit, reporting and follow-up, per inspector;
 - (4) standard number of ramp and unannounced inspections to be performed;
 - (5) standard duration of inspections, including preparation, reporting and follow-up, per inspector;
 - (6) minimum number and required qualification of inspectors for each audit/inspection.
- (e) Standard working time could be expressed either in working hours per inspector or in working days per inspector. All planning calculations should then be based on the same unit (hours or working days).
- (f) It is recommended to use a spreadsheet application to process data defined under (c) and (d), to assist in determining the total number of working hours / days per oversight planning cycle required for certification, oversight and enforcement activities. This application could also serve as a basis for implementing a system for planning the availability of personnel.
- (g) For each type of organisation certified by the competent authority and for FSTD qualification certificate holders the number of working hours / days per planning period for each qualified inspector that may be allocated for certification, oversight and enforcement activities should be determined, taking into account:
- (1) purely administrative tasks not directly related to oversight and certification;
 - (2) training;
 - (3) participation in other projects;
 - (4) planned absence; and
 - (5) the need to include a reserve for unplanned tasks or unforeseeable events.
- (h) The determination of working time available for certification, oversight and enforcement activities should also consider:
- (1) the possible use of qualified entities; and
 - (2) possible cooperation with other competent authorities for approvals involving more than one Member State.
- (i) Based on the elements listed above, the competent authority should be able to:
- (1) monitor dates when audits and inspections are due and when they have been carried out;
 - (2) implement a system to plan the availability of personnel; and

(3) identify possible gaps between the number and qualification of personnel and the required volume of certification and oversight.
Care should be taken to keep planning data up-to-date in line with changes in the underlying planning assumptions, with particular focus on risk-based oversight principles.

ARA.GEN.205 Allocation of tasks to qualified entities

(a) Tasks related to the initial certification or continuing oversight of persons or organisations subject to Regulation (EC) No 216/2008 and its Implementing Rules shall be allocated by Member States only to qualified entities. When allocating tasks, the competent authority shall ensure that it has:

(1) a system in place to initially and continuously assess that the qualified entity complies with Annex V to Regulation (EC) No 216/2008. This system and the results of the assessments shall be documented;

(2) established a documented agreement with a the qualified entity, approved by both parties at the appropriate management level, which clearly defines:

(i) the tasks to be performed;

(ii) the declarations, reports and records to be provided;

(iii) the technical conditions to be met in performing such tasks;

(iv) the related liability coverage; and

(v) the protection given to information acquired in carrying out such tasks.

(b) The competent authority shall ensure that the internal audit process and a safety risk management process

required by ARA.GEN.200(a)(4) cover all certification or continuing oversight tasks performed on its behalf.

GM1 ARA.GEN.205 Allocation of tasks to qualified entities

CERTIFICATION TASKS

The tasks that may be performed by a qualified entity on behalf of the competent authority include those related to the initial certification and continuing oversight of persons and organisations as defined in this Regulation, with the exclusion of the issuance of certificates, licences, ratings or approvals.

ARA.GEN.210 Changes in the management system

(a) The competent authority shall have a system in place to identify changes that affect its capability to perform its tasks and discharge its responsibilities as defined in Regulation (EC) No 216/2008 and its Implementing Rules.

This system shall enable it to take action as appropriate to ensure that its management system remains

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adequate and effective.

(b) The competent authority shall update its management system to reflect any change to Regulation (EC) No

216/2008 and its Implementing Rules in a timely manner, so as to ensure effective implementation.

(c) The competent authority shall notify the Agency of changes affecting its capability to perform its tasks and

discharge its responsibilities as defined in Regulation (EC) No 216/2008 and its Implementing Rules.

AMC1 ARA.GEN.210(d) Management system

PROCEDURES AVAILABLE TO THE AGENCY

(a) Copies of the procedures related to the competent authority's management system and their amendments to be made available to the Agency for the purpose of standardisation should provide at least the following information:

(1) Regarding continuing oversight functions undertaken by the competent authority, the competent authority's organisational structure with description of the main processes.

This information should demonstrate the allocation of responsibilities within the competent authority, and that the competent authority is capable of carrying out the full range of tasks regarding the size and complexity of the Member State's aviation industry. It should also consider overall proficiency and authorisation scope of competent authority personnel.

(2) For personnel involved in oversight activities, the minimum professional qualification requirements and experience and principles guiding appointment (e.g. assessment).

(3) How the following are carried out: assessing applications and evaluating compliance, issuance of certificates, performance of continuing oversight, follow-up of findings, enforcement measures and resolution of safety concerns.

(4) Principles of managing exemptions and derogations.

(5) Processes in place to disseminate applicable safety information for timely reaction to a safety problem.

(6) Criteria for planning continuing oversight (oversight programme), including adequate management of interfaces when conducting continuing oversight (air operations, flight crew licensing, continuing airworthiness management for example).

(7) Outline of the initial training of newly recruited oversight personnel (taking future activities into account), and the basic framework for continuation training of oversight personnel.

(b) As part of the continuous monitoring of a competent authority, the Agency may request details of the working methods used, in addition to the copy of the procedures of the competent authority's management system (and amendments). These additional details are the procedures and related guidance material describing working methods for competent authority personnel conducting oversight.

(c) Information related to the competent authority's management system may be submitted in electronic format.

ARA.GEN.220 Record-keeping

(a) The competent authority shall establish a system of record-keeping providing for adequate storage, accessibility and reliable traceability of:

- (1) the management system's documented policies and procedures;
- (2) training, qualification and authorisation of its personnel;
- (3) the allocation of tasks, covering the elements required by ARA.GEN.205 as well as the details of tasks allocated;
- (4) certification processes and continuing oversight of certified organisations;
- (5) processes for issuing personnel licences, ratings, certificates and attestations and for the continuing oversight of the holders of those licences, ratings, certificates and attestations;
- (6) processes for issuing FSTD qualification certificates and for the continuing oversight of the FSTD and of the organisation operating it;
- (7) oversight of persons and organisations exercising activities within the territory of the Member State, but overseen or certified by the competent authority of another Member State or the Agency, as agreed between these authorities;
- (8) the evaluation and notification to the Agency of alternative means of compliance proposed by organisations and the assessment of alternative means of compliance used by the competent authority itself;
- (9) findings, corrective actions and date of action closure;
- (10) enforcement measures taken;
- (11) safety information and follow-up measures; and
- (12) the use of flexibility provisions in accordance with Article 14 of Regulation (EC) No 216/2008.

(b) The competent authority shall maintain a list of all organisation certificates, FSTD qualification certificates

and personnel licences, certificates and attestations it issued.

(c) All records shall be kept for the minimum period specified in this Regulation. In the absence of such indication, records shall be kept for a minimum period of 5 years subject to applicable data protection law.

AMC1 ARA.GEN.220(a) Record-keeping

GENERAL

- (a) The record-keeping system should ensure that all records are accessible whenever needed within a reasonable time. These records should be organised in a way that ensures traceability and retrievability throughout the required retention period.
- (b) Records should be kept in paper form or in electronic format or a combination of both media. Records stored on microfilm or optical disc form are also acceptable. The records should remain legible and accessible throughout the required retention period. The retention period starts when the record has been created.
- (c) Paper systems should use robust material, which can withstand normal handling and filing. Computer systems should have at least one backup system, which should be updated within 24

hours of any new entry. Computer systems should include safeguards against unauthorised alteration of data.

(d) All computer hardware used to ensure data backup should be stored in a different location from that containing the working data and in an environment that ensures they remain in good condition. When hardware- or software-changes take place, special care should be taken that all necessary data continue to be accessible at least through the full period specified in the relevant Subpart or by default in ARA.GEN.220 (c).

AMC1 ARA.GEN.220(a)(1);(2);(3) Record-keeping

COMPETENT AUTHORITY MANAGEMENT SYSTEM

Records related to the competent authority's management system should include, as a minimum and as applicable:

- (a) the documented policies and procedures;
- (b) the personnel files of competent authority personnel, with supporting documents related to training and qualifications;
- (c) the results of the competent authority's internal audit and safety risk management processes, including audit findings and corrective actions; and
- (d) the contract(s) established with qualified entities performing certification or oversight tasks on behalf of the competent authority.

AMC1 ARA.GEN.220(a)(4) Record-keeping

ORGANISATIONS

Records related to an organisation certified by the competent authority should include, as appropriate to the type of organisation:

- (a) the application for an organisation approval;
- (b) the documentation based on which the approval has been granted and any amendments to that documentation;
- (c) the organisation approval certificate including any changes;
- (d) a copy of the continuing oversight programme listing the dates when audits are due and when such audits were carried out;
- (e) continuing oversight records including all audit and inspection records;
- (f) copies of all relevant correspondence;
- (g) details of any exemption and enforcement actions;
- (h) any report from other competent authorities relating to the oversight of the organisation; and
- (i) a copy of any other document approved by the competent authority.

GM1 ARA.GEN.220(a)(4) Record-keeping

ORGANISATIONS – DOCUMENTATION

Documentation to be kept as records in support of the approval include the management system documentation, including any technical manuals, such as the operations manual, and training manual, that have been submitted with the initial application, and any amendments to these documents.

AMC1 ARA.GEN.220(a)(5) Record-keeping

PERSONS

Records related to personnel licences, certificates, ratings, authorisations or attestations issued by the competent authority should include, as a minimum:

- (a) the application for a licence, certificate, rating, authorisation or attestation or change to a licence, certificate, rating, authorisation or attestation;
- (b) documentation in support of the application for a licence, certificate, rating, authorisation or attestation or change to a licence, certificate, rating, authorisation or attestation, covering as applicable:
 - (1) theoretical examination(s);
 - (2) skill test(s);
 - (3) proficiency check(s); and
 - (4) certificates attesting required experience;
- (c) a copy of the licence or certificate including any changes;
- (d) all relevant correspondence or copies thereof;
- (e) details of any exemption;
- (f) details of any enforcement action(s); and
- (g) any report from other competent authorities relating to personnel licences, certificates, ratings, authorisations or attestations issued by the competent authority.

AMC1 ARA.GEN.220(a)(7) Record-keeping

ACTIVITIES PERFORMED IN THE TERRITORY OF A MEMBER STATE BY PERSONS OR ORGANISATIONS ESTABLISHED OR RESIDING IN ANOTHER MEMBER STATE

- (a) Records related to the oversight of activities performed in the territory of a Member State by persons or organisations established or residing in another Member State should include, as a minimum:
 - (1) oversight records including all audit and inspection records and related correspondence;
 - (2) copies of all relevant correspondence to exchange information with other competent authorities relating to the oversight of such persons/organisations;
 - (3) details of any enforcement measures and penalties; and
 - (4) any report from other competent authorities relating to the oversight of these persons/organisations, including any notification of evidence showing non-compliance with the applicable requirements.
- (b) Records should be kept by the competent authority having performed the audit or inspection and should be made available to other competent authorities at least in the following cases:
 - (1) serious incidents or accidents;
 - (2) findings through the oversight programme where organisations certified by another competent authority are involved, to determine the root cause;
 - (3) an organisation being certified or having approvals in several Member States.
- (c) When records are requested by another competent authority, the reason for the request should be clearly stated.
- (d) The records can be made available by sending a copy or by allowing access to them for consultation.

GM1 ARA.GEN.220 Record-keeping

GENERAL

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Records are required to document results achieved or to provide evidence of activities performed. Records become factual when recorded. Therefore, they are not subject to version control. Even when a new record is produced covering the same issue, the previous record remains valid.

SECTION III - Oversight, certification and enforcement

ARA.GEN.300 Oversight

(a) The competent authority shall verify:

(1) compliance with the requirements applicable to organisations or persons prior to the issue of an organisation certificate, approval, FSTD qualification certificate or personnel licence, certificate, rating, or attestation, as applicable;

(2) continued compliance with the applicable requirements of organisations it has certified, of persons and

of FSTD qualification certificate holders;

(3) implementation of appropriate safety measures mandated by the competent authority as defined in ARA.GEN.135(c) and (d).

(b) This verification shall:

(1) be supported by documentation specifically intended to provide personnel responsible for safety oversight with guidance to perform their functions;

(2) provide the persons and organisations concerned with the results of safety oversight activity;

(3) be based on audits and inspections, including ramp and unannounced inspections; and

(4) provide the competent authority with the evidence needed in case further action is required, including the measures foreseen by ARA.GEN.350 and ARA.GEN.355.

(c) The scope of oversight defined in (a) and (b) shall take into account the results of past oversight activities and the safety priorities.

(d) Without prejudice to the competences of the Member States and to their obligations as set out in ARO.RAMP, the scope of the oversight of activities performed in the territory of a Member State by persons or organisations established or residing in another Member State shall be determined on the basis of the safety priorities, as well as of past oversight activities.

(e) Where the activity of a person or organisation involves more than one Member State or the Agency, the competent authority responsible for the oversight under (a) may agree to have oversight tasks performed by the competent authority(ies) of the Member State(s) where the activity takes place or by the Agency. Any person or organisation subject to such agreement shall be informed of its existence and of its scope.

(f) The competent authority shall collect and process any information deemed useful for oversight, including for ramp and unannounced inspections.

AMC1 ARA.GEN.300(a);(b);(c) Oversight

EVALUATION OF APPROVED TRAINING ORGANISATIONS' OPERATIONAL SAFETY RISK ASSESSMENT

As part of the initial certification or the continuing oversight of an ato, the competent authority should normally evaluate its safety risk assessment processes related to hazards identified by the ATO as having an interface with its operations. These safety risk assessments should be identifiable processes of the ato's management system. As part of its continuing oversight, the competent authority should also remain satisfied as to the effectiveness of these safety risk assessments.

(a) General methodology for operational hazards

The competent authority should establish a methodology for evaluating the safety risk assessment processes of the ATO's management system.

When related to operational hazards, the competent authority's evaluation under its normal oversight process should be considered satisfactory if the ATO demonstrates its competence and capability to:

- (1) understand the hazards identified and their consequences on its operations;
- (2) be clear on where these hazards may exceed acceptable safety risk limits;
- (3) identify and implement mitigations including suspension of operations where mitigation cannot reduce the risk to within safety risk limits;
- (4) develop and execute effectively, robust procedures for the preparation and the safe operation of the flights subject to the hazards identified;
- (5) assess the competence and currency of its staff in relation to the duties for the intended operations and implement any necessary training; and
- (6) ensure sufficient numbers of qualified and competent staff for such duties.

The competent authority should take into account:

- (1) the ATO's recorded mitigations for each unacceptable risk identified are in place;
- (2) the operational procedures specified by the ATO with the most significance to safety appear to be robust; and
- (3) that the staff on which the ATO depends in respect of those duties necessary for the intended operations are trained and assessed as competent in the relevant procedures.

EVALUATION OF APPROVED TRAINING ORGANISATIONS' VOLCANIC ASH SAFETY RISK ASSESSMENT

In addition to the general methodology for operational hazards, the competent authority's evaluation under its normal oversight process should also assess the ATO's competence and capability to:

- (1) choose the correct information sources to use to interpret the information related to volcanic ash contamination forecast and to resolve correctly any conflicts among such sources; and
- (2) take account of all information from its type certificate holders (TCHs) concerning volcanic ash-related airworthiness aspects of the aircraft it operates, and the related pre-flight, in-flight and post flight precautions to be observed;

GM1 ARA.GEN.300(a);(b);(c) Oversight

VOLCANIC ASH SAFETY RISK ASSESSMENT - ADDITIONAL GUIDANCE

Further guidance on the assessment of an ATO volcanic ash safety risk assessment is given in ICAO Doc. 9974 (Flight safety and volcanic ash – Risk management of flight operations with known or forecast volcanic ash contamination).

GM1 ARA.GEN.300(d) Oversight

ACTIVITIES WITHIN THE TERRITORY OF THE MEMBER STATE

- (a) Activities performed in the territory of the Member State by persons or organisations established or residing in another Member State include:
- (1) activities of organisations certified by the competent authority of any other Member State or the Agency;
 - (2) activities of persons holding a licence, certificate, rating, or attestation issued by the competent authority of any other Member State; and
 - (3) activities of persons making declarations to the competent authority of any other Member State.
- (b) Audits and inspections of such activities, including ramp and unannounced inspections, should be prioritised towards those areas of greater safety concern, as identified through the analysis of data on safety hazards and their consequences in operations.

ARA.GEN.305 Oversight programme

(a) The competent authority shall establish and maintain an oversight programme covering the oversight activities required by ARA.GEN.300 and by ARO.RAMP.

(b) For organisations certified by the competent authority and FSTD qualification certificate holders, the oversight programme shall be developed taking into account the specific nature of the organisation, the complexity of its activities, the results of past certification and/or oversight activities and shall be based on the

assessment of associated risks. It shall include within each oversight planning cycle:

- (1) audits and inspections, including ramp and unannounced inspections as appropriate; and
- (2) meetings convened between the accountable manager and the competent authority to ensure both remain informed of significant issues.

(c) For organisations certified by the competent authority and FSTD qualification certificate holders an oversight planning cycle not exceeding 24 months shall be applied.

The oversight planning cycle may be reduced if there is evidence that the safety performance of the organisation or the FTSD qualification certificate holder has decreased.

The oversight planning cycle may be extended to a maximum of 36 months if the competent authority has established that, during the previous 24 months:

- (1) the organisation has demonstrated an effective identification of aviation safety hazards and management of associated risks;
- (2) the organisation has continuously demonstrated under ORA.GEN.130 that it has full control over all changes;
- (3) no level 1 findings have been issued; and
- (4) all corrective actions have been implemented within the time period accepted or extended by the competent authority as defined in ARA.GEN.350(d)(2).

The oversight planning cycle may be further extended to a maximum of 48 months if, in addition to the above, the organisation has established, and the competent authority has approved, an effective continuous reporting system to the competent authority on the safety performance and regulatory compliance of the organisation itself.

(ca) Notwithstanding (c), for organisations only providing training towards the LAPL, PPL, SPL or BPL and associated ratings and certificates, an oversight planning cycle not exceeding 48 months shall be applied. The

oversight planning cycle shall be reduced if there is evidence that the safety performance of the organisation

holder has decreased.

The oversight planning cycle may be extended to a maximum of 72 months, if the competent authority has

established that, during the previous 48 months:

(1) the organisation has demonstrated an effective identification of aviation safety hazards and management of associated risks, as demonstrated by the results of the annual review in accordance with ORA.GEN.200(c);

(2) the organisation has continuously maintained control over all changes in accordance with ORA.GEN.130 as demonstrated by the results of the annual review in accordance with ORA.GEN.200(c);

(3) no level 1 findings have been issued; and

(4) all corrective actions have been implemented within the time period accepted or extended by the competent authority as defined in ARA.GEN.350(d)(2).

(d) For persons holding a licence, certificate, rating, or attestation issued by the competent authority the oversight programme shall include inspections, including unannounced inspections, as appropriate.

(e) The oversight programme shall include records of the dates when audits, inspections and meetings are due

and when such audits, inspections and meetings have been carried out.

AMC1 ARA.GEN.305(b) Oversight programme

SPECIFIC NATURE AND COMPLEXITY OF THE ORGANISATION, RESULTS OF PAST OVERSIGHT

(a) When determining the oversight programme for an organisation the competent authority should consider in particular the following elements, as applicable:

- (1) the implementation by the organisation of industry standards, directly relevant to the organisation's activity subject to this Regulation;
- (2) the procedure applied for and scope of changes not requiring prior approval;
- (3) specific approvals held by the organisation;
- (4) specific procedures implemented by the organisation related to any alternative means of compliance used.

(b) For the purpose of assessing the complexity of an organisation's management system, AMC1 ORA.GEN.200(b) should be used.

(c) Regarding results of past oversight, the competent authority should also take into account relevant results of ramp inspections of organisations it has certified that were performed in other Member States in accordance with ARO.RAMP.

AMC1 ARA.GEN.305(b)(1) Oversight programme

AUDIT

- (a) The oversight programme should indicate which aspects of the approval will be covered with each audit.
- (b) Part of an audit should concentrate on the organisation's compliance monitoring reports produced by the compliance monitoring personnel to determine if the organisation is identifying and correcting its problems.
- (c) At the conclusion of the audit, an audit report should be completed by the auditing inspector, including all findings raised.

AMC2 ARA.GEN.305(b)(1) Oversight programme

RAMP INSPECTIONS

When conducting a ramp inspection of aircraft used by organisations under its regulatory oversight the competent authority should, in as far as possible, comply with the requirements defined in ARO.RAMP.

AMC1 ARA.GEN.305(b);(c) Oversight programme

INDUSTRY STANDARDS

- (a) For organisations having demonstrated compliance with industry standards, the competent authority may adapt its oversight programme, in order to avoid duplication of specific audit items.
- (b) Demonstrated compliance with industry standards should not be considered in isolation from the other elements to be considered for the competent authority's risk-based oversight.
- (c) In order to be able to credit any audits performed as part of certification in accordance with industry standards, the following should be considered:
- (1) the demonstration of compliance is based on certification auditing schemes providing for independent and systematic verification;
 - (2) the existence of an accreditation scheme and accreditation body for certification in accordance with the industry standards has been verified;
 - (3) certification audits are relevant to the requirements defined in Annex VII (Part-ORA) and other Annexes to this Regulation as applicable;
 - (4) the scope of such certification audits can easily be mapped against the scope of oversight in accordance with Part-ORA;
 - (5) audit results are accessible to the competent authority and open to exchange of information in accordance with Article 15(1) of Regulation (EC) No 216/2008; and
 - (6) the audit planning intervals of certification audits i.a.w. industry standards are compatible with the oversight planning cycle.

AMC1 ARA.GEN.305(c) Oversight programme

OVERSIGHT PLANNING CYCLE

- (a) When determining the oversight planning cycle and defining the oversight programme, the competent authority should assess the risks related to the activity of each organisation and adapt

the oversight to the level of risk identified and to the organisation's ability to effectively manage safety risks.

(b) The competent authority should establish a schedule of audits and inspections appropriate to each organisation. The planning of audits and inspections should take into account the results of the hazard identification and risk assessment conducted and maintained by the organisation as part of the organisation's management system. Inspectors should work in accordance with the schedule provided to them.

(c) When the competent authority, having regard to an organisation's safety performance, varies the frequency of an audit or inspection it should ensure that all aspects of the organisation's activity are audited and inspected within the applicable oversight planning cycle.

(d) The section(s) of the oversight programme dealing with ramp inspections should be developed based on geographical locations, taking into account aerodrome activity, and focusing on key issues that can be inspected in the time available without unnecessarily delaying the operations.

AMC2 ARA.GEN.305(c) Oversight programme

OVERSIGHT PLANNING CYCLE

(a) For each organisation certified by the competent authority and each FSTD qualification certificate holder all processes should be completely audited at periods not exceeding the applicable oversight planning cycle. The beginning of the first oversight planning cycle is normally determined by the date of issue of the first certificate. If the competent authority wishes to align the oversight planning cycle with the calendar year, it should shorten the first oversight planning cycle accordingly.

(b) The interval between two audits for a particular process should not exceed the interval of the applicable oversight planning cycle.

(c) Audits should include at least one on-site audit within each oversight planning cycle. For organisations exercising their regular activity at more than one site, the determination of the sites to be audited should consider the results of past oversight, the volume of activity at each site, as well as main risk areas identified.

(d) For organisations holding more than one certificate, the competent authority may define an integrated oversight schedule to include all applicable audit items. In order to avoid duplication of audits, credit may be granted for specific audit items already completed during the current oversight planning cycle, subject to four conditions:

- (1) the specific audit item should be the same for all certificates under consideration;
- (2) there should be satisfactory evidence on record that such specific audit items were carried out and that all corrective actions have been implemented to the satisfaction of the competent authority;
- (3) the competent authority should be satisfied that there is no reason to believe standards have deteriorated in respect of those specific audit items being granted a credit;
- (4) the interval between two audits for the specific item being granted a credit should not exceed the applicable oversight planning cycle.

AMC1 ARA.GEN.305(d) Oversight programme

PERSONS HOLDING A LICENCE, CERTIFICATE, RATING OR ATTESTATION

The oversight of persons holding a licence, certificate, rating or attestation should normally be ensured as part of the oversight of organisations. Additionally, the competent authority should verify compliance with applicable requirements when endorsing or renewing ratings.

To properly discharge its oversight responsibilities, the competent authority should perform a certain number of unannounced verifications.

ARA.GEN.310 Initial certification procedure – organisations

(a) Upon receiving an application for the initial issue of a certificate for an organisation, the competent authority shall verify the organisation's compliance with the applicable requirements.

(b) When satisfied that the organisation is in compliance with the applicable requirements, the competent authority shall issue the certificate(s), as established in Appendixes III and V to this Part. The certificate(s) shall be issued for an unlimited duration. The privileges and scope of the activities that the organisation is approved

to conduct shall be specified in the terms of approval attached to the certificate(s).

(c) To enable an organisation to implement changes without prior competent authority approval in accordance with ORA.GEN.130, the competent authority shall approve the procedure submitted by the organisation defining the scope of such changes and describing how such changes will be managed and notified.

AMC1 ARA.GEN.310(a) Initial certification procedure - organisations**VERIFICATION OF COMPLIANCE**

(a) In order to verify the organisation's compliance with the applicable requirements, the competent authority should conduct an audit of the organisation, including interviews of personnel and inspections carried out at the organisation's facilities.

(b) The competent authority should only conduct such audit after being satisfied that the application shows compliance with the applicable requirements.

(c) The audit should focus on the following areas:

(1) detailed management structure, including names and qualifications of personnel required by ORA.GEN.210 and adequacy of the organisation and management structure;

(2) personnel:

(i) adequacy of number and qualifications with regard to the intended terms of approval and associated privileges;

(ii) validity of licences, ratings, certificates or attestations as applicable;

(3) processes for safety risk management and compliance monitoring;

(4) facilities – adequacy with regard to the organisation's scope of work;

(5) documentation based on which the certificate should be granted (organisation documentation as required by Part-ORA, including technical manuals, such as operations manual or training manual).

(d) In case of non-compliance, the applicant should be informed in writing of the corrections that are required.

(e) In cases where an application for an organisation certificate is refused, the applicant should be informed of the right of appeal as exists under national law.

ARA.GEN.315 Procedure for issue, revalidation, renewal or change of licences, ratings, certificates or attestations – persons

(a) Upon receiving an application for the issue, revalidation, renewal or change of a personal licence, rating, certificate or attestation and any supporting documentation, the competent authority shall verify whether the applicant meets the applicable requirements.

(b) When satisfied that the applicant meets the applicable requirements, the competent authority shall issue, revalidate, renew or change the licence, certificate, rating, or attestation.

AMC1 ARA.GEN.315(a) Procedure for issue, revalidation, renewal or change of licences, ratings or certificates - persons

VERIFICATION OF COMPLIANCE

(a) In order to verify that the applicant meets the requirements, the competent authority should review the application and any supporting documents submitted, for completeness and compliance with applicable requirements.

(b) As part of the verification that the applicant meets the requirements, the competent authority should check that he/she:

(1) was not holding any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another Member State;

(2) has not applied for any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category in another Member State; and

(3) has never held any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another Member State which was revoked or suspended in any other Member State.

(c) The competent authority should request the applicant to make a declaration covering items (b)(1) to (b)(3). Such declaration should include a statement that any incorrect information could disqualify the applicant from being granted a personnel licence, certificate, rating, authorisation or attestation. In case of doubts, the competent authority should contact the competent authority of the Member State where the applicant may have previously held any personnel licence, certificate, rating, authorisation or attestation.

ARA.GEN.330 Changes – organisations

(a) Upon receiving an application for a change that requires prior approval, the competent authority shall verify the organisation's compliance with the applicable requirements before issuing the approval.

The competent authority shall prescribe the conditions under which the organisation may operate during the change, unless the competent authority determines that the organisation's certificate needs to be suspended.

When satisfied that the organisation is in compliance with the applicable requirements, the competent authority shall approve the change.

(b) Without prejudice to any additional enforcement measures, when the organisation implements changes requiring prior approval without having received competent authority approval as defined in (a), the competent authority shall suspend, limit or revoke the organisation's certificate.

(c) For changes not requiring prior approval, the competent authority shall assess the information provided in the notification sent by the organisation in accordance with ORA.GEN.130 to verify compliance with the applicable requirements. In case of any non-compliance, the competent authority shall:

(1) notify the organisation about the non-compliance and request further changes; and

(2) in case of level 1 or level 2 findings, act in accordance with ARA.GEN.350.

AMC1 ARA.GEN.330 Changes – organisations

GENERAL

(a) Changes in nominated persons:

The competent authority should be informed of any changes to personnel specified in Part-ORA that may affect the certificate or terms of approval/approval schedule attached to it. When an organisation submits the name of a new nominee for any of the persons nominated as per ORA.GEN.210 (b), the competent authority should require the organisation to produce a written résumé of the proposed person's qualifications. The competent authority should reserve the right to interview the nominee or call for additional evidence of his/her suitability before deciding upon his/her acceptability.

(b) A simple management system documentation status sheet should be maintained, which contains information on when an amendment was received by the competent authority and when it was approved.

(c) The organisation should provide each management system documentation amendment to the competent authority, including for the amendments that do not require prior approval by the competent authority. Where the amendment requires competent authority approval, the competent authority, when satisfied, should indicate its approval in writing. Where the amendment does not require prior approval, the competent authority should acknowledge receipt in writing within 10 working days.

(d) For changes requiring prior approval, in order to verify the organisation's compliance with the applicable requirements, the competent authority should conduct an audit of the organisation, limited to the extent of the changes. If required for verification, the audit should include interviews and inspections carried out at the organisation's facilities.

GM1 ARA.GEN.330 Changes - organisations

CHANGE OF NAME OF THE ORGANISATION

(a) On receipt of the application and the relevant parts of the organisation's documentation as required by Part-ORA, the competent authority should re-issue the certificate.

(b) A name change alone does not require the competent authority to audit the organisation, unless there is evidence that other aspects of the organisation have changed.

ARA.GEN.350 Findings and corrective actions – organisations

(a) The competent authority for oversight in accordance with ARA.GEN.300 (a) shall have a system to analyse findings for their safety significance.

(b) A level 1 finding shall be issued by the competent authority when any significant non-compliance is detected with the applicable requirements of Regulation (EC) No 216/2008 and its Implementing Rules, with the organisation's procedures and manuals or with the terms of an approval or certificate which lowers safety or seriously hazards flight safety.

The level 1 findings shall include:

(1) failure to give the competent authority access to the organisation's facilities as defined in ORA.GEN.140 during normal operating hours and after two written requests;

- (2) obtaining or maintaining the validity of the organisation certificate by falsification of submitted documentary evidence;
- (3) evidence of malpractice or fraudulent use of the organisation certificate; and
- (4) the lack of an accountable manager.

(c) A level 2 finding shall be issued by the competent authority when any non-compliance is detected with the applicable requirements of Regulation (EC) No 216/2008 and its Implementing Rules, with the organisation's procedures and manuals or with the terms of an approval or certificate which could lower safety or hazard flight safety.

(d) When a finding is detected during oversight or by any other means, the competent authority shall, without prejudice to any additional action required by Regulation (EC) No 216/2008 and its Implementing Rules, communicate the finding to the organisation in writing and request corrective action to address the noncompliance(s) identified. Where relevant, the competent authority shall inform the State in which the aircraft is registered.

(1) In the case of level 1 findings the competent authority shall take immediate and appropriate action to prohibit or limit activities and, if appropriate, it shall take action to revoke the certificate or specific approval or to limit or suspend it in whole or in part, depending upon the extent of the level 1 finding, until successful corrective action has been taken by the organisation.

(2) In the case of level 2 findings, the competent authority shall:

(i) grant the organisation a corrective action implementation period appropriate to the nature of the finding that in any case initially shall not be more than 3 months. At the end of this period, and subject to the nature of the finding, the competent authority may extend the 3-month period subject to a satisfactory corrective action plan agreed by the competent authority; and

(ii) assess the corrective action and implementation plan proposed by the organisation and, if the assessment concludes that they are sufficient to address the non-compliance(s), accept these.

(3) Where an organisation fails to submit an acceptable corrective action plan, or to perform the corrective action within the time period accepted or extended by the competent authority, the finding shall be raised to a level 1 finding and action taken as laid down in (d)(1).

(4) The competent authority shall record all findings it has raised or that have been communicated to it and, where applicable, the enforcement measures it has applied, as well as all corrective actions and date of action closure for findings.

(e) Without prejudice to any additional enforcement measures, when the authority of a Member State acting under the provisions of ARA.GEN.300(d) identifies any non-compliance with the applicable requirements of

Regulation (EC) No 216/2008 and its Implementing Rules by an organisation certified by the competent authority of another Member State or the Agency, it shall inform that competent authority and provide an indication of the level of finding.

GM1 ARA.GEN.350 Findings and corrective actions - organisations

TRAINING

For a level 1 finding it may be necessary for the competent authority to ensure that further training by the organisation is carried out and audited by the competent authority before the activity is resumed, dependent upon the nature of the finding.

ARA.GEN.355 Findings and enforcement measures – persons

(a) If, during oversight or by any other means, evidence is found by the competent authority responsible for oversight in accordance with ARA.GEN.300(a) that shows a non-compliance with the applicable requirements by a person holding a licence, certificate, rating or attestation issued in accordance with Regulation (EC) No

216/2008 and its Implementing Rules, the competent authority shall raise a finding, record it and communicate it in writing to the licence, certificate, rating or attestation holder.

(b) When such finding is raised, the competent authority shall carry out an investigation. If the finding is confirmed, it shall:

- (1) limit, suspend or revoke the licence, certificate, rating or attestation as applicable, when a safety issue has been identified; and
- (2) take any further enforcement measures necessary to prevent the continuation of the non-compliance.

(c) Where applicable, the competent authority shall inform the person or organisation that issued the medical certificate or attestation.

(d) Without prejudice to any additional enforcement measures, when the authority of a Member State acting under the provisions of ARA.GEN.300(d) finds evidence showing a non-compliance with the applicable requirements by a person holding a licence, certificate, rating or attestation issued by the competent authority of any other Member State, it shall inform that competent authority.

(e) If, during oversight or by any other means, evidence is found showing a non-compliance with the applicable requirements by a person subject to the requirements laid down in Regulation (EC) No 216/2008 and its

Implementing Rules and not holding a licence, certificate, rating or attestation issued in accordance with that

Regulation and its Implementing Rules, the competent authority that identified the non-compliance shall take any enforcement measures necessary to prevent the continuation of that non-compliance.

GM1 AMC1-ARA.GEN.355(e) Findings and enforcement measures – persons

This provision is necessary to ensure that enforcement measures will be taken also in cases where the competent authority may not act on the licence, certificate or attestation. The type of enforcement measure will depend on the applicable national law and may include for example the payment of a fine or the prohibition from exercising.

It covers two cases:

- (a) persons subject to the requirements laid down in Regulation (EC) No 216/2008 and its Implementing Rules who are not required to hold a licence, certificate or attestation – for example general medical practitioners (GMPs); and
- (b) persons who are required to hold a licence, rating, certificate or attestation, but who do not hold the appropriate licence, rating, certificate or attestation as required for the activity they perform.

SUBPART FCL - SPECIFIC REQUIREMENTS RELATING TO FLIGHT CREW LICENSING

SECTION I – General

ARA.FCL.120 Record-keeping

In addition to the records required in ARA.GEN.220(a), the competent authority shall include in its system of record-keeping results of theoretical knowledge examinations and the assessments of pilots' skills.

SECTION II - Licences, ratings and certificates

ARA.FCL.200 Procedure for issue, revalidation or renewal of a licence, rating or certificate

- (a) Issue of licences and ratings. The competent authority shall issue a pilot licence and associated ratings, using the form as established in Appendix I to this Part.
- (b) Issue of instructor and examiner certificates. The competent authority shall issue an instructor or examiner certificate as:
- (1) an endorsement of the relevant privileges in the pilot licence as established in Appendix I to this Part; or
 - (2) a separate document, in a form and manner specified by the competent authority.
- (c) Endorsement of licence by examiners. Before specifically authorising certain examiners to revalidate or renew ratings or certificates, the competent authority shall develop appropriate procedures.
- (d) Endorsement of licence by instructors. Before specifically authorising certain instructors to revalidate a single-engine piston or TMG class rating, the competent authority shall develop appropriate procedures.

ARA.FCL.205 Monitoring of examiners

- (a) The competent authority shall develop an oversight programme to monitor the conduct and performance of examiners taking into account:
- (1) the number of examiners it has certified; and
 - (2) the number of examiners certified by other competent authorities exercising their privileges within the territory where the competent authority exercises oversight.
- (b) The competent authority shall maintain a list of examiners it has certified. The list shall state the privileges of the examiners and be published and kept updated by the competent authority.
- (c) The competent authority shall develop procedures to designate examiners for the conduct of skill tests.

AMC1 ARA.FCL.205 Monitoring of examiners

QUALIFICATION OF INSPECTORS

Inspectors of the competent authority supervising examiners should ideally meet the same requirements as the examiners being supervised. However, it is unlikely that they could be so qualified on the large variety of types and tasks for which they have a responsibility and, since they normally only observe training and testing, it is acceptable if they are qualified for the role of an inspector.

ARA.FCL.210 Information for examiners

- (a) The competent authority shall notify the Agency of the national administrative procedures, requirements for protection of personal data, liability, accident insurance and fees applicable in its territory, which shall be used by examiners when conducting skill tests, proficiency checks or assessments of competence of an applicant for which the competent authority is not the same that issued the examiner's certificate.
- (b) To facilitate dissemination and access to the information received from competent authorities under (a), the Agency shall publish this information according to a format prescribed by it.
- (c) The competent authority may provide examiners it has certified and examiners certified by other competent authorities exercising their privileges in their territory with safety criteria to be observed when skill tests and proficiency checks are conducted in an aircraft.

ARA.FCL.215 Validity period

- (a) When issuing or renewing a rating or certificate, the competent authority or, in the case of renewal, an examiner specifically authorised by the competent authority, shall extend the validity period until the end of the relevant month.
- (b) When revalidating a rating, an instructor or an examiner certificate, the competent authority, or an examiner specifically authorised by the competent authority, shall extend the validity period of the rating or certificate until the end of the relevant month.
- (c) The competent authority, or an examiner specifically authorised for that purpose by the competent authority, shall enter the expiry date on the licence or the certificate.
- (d) The competent authority may develop procedures to allow privileges to be exercised by the licence or certificate holder for a maximum period of 8 weeks after successful completion of the applicable examination(s), pending the endorsement on the licence or certificate.

ARA.FCL.220 Procedure for the re-issue of a pilot licence

- (a) The competent authority shall re-issue a licence whenever necessary for administrative reasons and:
- (1) after initial issue of a rating; or
 - (2) when paragraph XII of the licence established in Appendix I to this Part is completed and no further spaces remain.
- (b) Only valid ratings and certificates shall be transferred to the new licence document.

ARA.FCL.250 Limitation, suspension or revocation of licences, ratings and certificates

- (a) The competent authority shall limit, suspend or revoke as applicable a pilot licence and associated ratings or certificates in accordance with ARA.GEN.355 in, but not limited to, the following circumstances:
- (1) obtaining the pilot licence, rating or certificate by falsification of submitted documentary evidence;
 - (2) falsification of the logbook and licence or certificate records;
 - (3) the licence holder no longer complies with the applicable requirements of Part-FCL;
 - (4) exercising the privileges of a licence, rating or certificate when adversely affected by alcohol or drugs;
 - (5) non-compliance with the applicable operational requirements;
 - (6) evidence of malpractice or fraudulent use of the certificate; or
 - (7) unacceptable performance in any phase of the flight examiner's duties or responsibilities.
- (b) The competent authority may also limit, suspend or revoke a licence, rating or certificate upon the written request of the licence or certificate holder.
- (c) All skill tests, proficiency checks or assessments of competence conducted during suspension or after the revocation of an examiner's certificate will be invalid.

SECTION III - Theoretical knowledge examinations

ARA.FCL.300 Examination procedures

- (a) The competent authority shall put in place the necessary arrangements and procedures to allow applicants to undergo theoretical knowledge examinations in accordance with the applicable requirements of Part-FCL.
- (b) In the case of the ATPL, MPL, commercial pilot licence (CPL), and instrument ratings, those procedures shall comply with all of the following:
- (1) Examinations shall be done in written or computer-based form.
 - (2) Questions for an examination shall be selected by the competent authority, according to a common method which allows coverage of the entire syllabus in each subject, from the European Central Question Bank (ECQB). The ECQB is a database of multiple choice questions held by the Agency.
 - (3) The examination in communications may be provided separately from those in other subjects. An applicant who has previously passed one or both of the examinations in visual flight rules (VFR) and instrument flight rules (IFR) communications shall not be re-examined in the relevant sections.
- (c) The competent authority shall inform applicants of the languages available for examinations.
- (d) The competent authority shall establish appropriate procedures to ensure the integrity of the examinations.
- (e) If the competent authority finds that the applicant is not complying with the examination procedures during the examination, this shall be assessed with a view to failing the applicant, either in the examination of a single subject or in the examination as a whole.
- (f) The competent authority shall ban applicants who are proven to be cheating from taking any further examination for a period of at least 12 months from the date of the examination in which they were found cheating.

AMC1 ARA.FCL.300 Examination procedures

GENERAL

- (a) The competent authority should provide suitable facilities for the conduct of examinations.
- (b) The content of the examination papers should retain a confidential status until the end of the examination session.
- (c) The identity of the applicant should be confirmed before an examination is taken.
- (d) Examination applicants should be seated in a way so that they cannot read each other's examination papers. They should not speak to any person other than the invigilators.
- (e) All examination papers, associated documents and additional papers handed out to the applicants for the examination should be handed back to the invigilator at the end of the examination.
- (f) Only the examination paper, specific documentation and tools needed for the examination should be available to the applicant during the examination.
- (g) Applicants may use the following equipment during an examination:
- (1) a scientific, non-programmable, non-alphanumeric calculator without specific aviation functions;
 - (2) mechanical navigation slide-rule (DR calculator);
 - (3) protractor;
 - (4) compasses and dividers;
 - (5) ruler.
- (h) Applicants may use a translation dictionary at the discretion of the competent authority.
- (i) Except equipment specified above, applicant(s) should not use any electronic equipment during the examination(s).

AMC1 ARA.FCL.300(b) Examination procedures

THEORETICAL KNOWLEDGE EXAMINATIONS FOR PROFESSIONAL LICENCES AND INSTRUMENT RATINGS

With regard to the IR(A), this table applies to theoretical knowledge examinations for applicants who have completed a modular training course for the IR(A) according to Appendix 6 section A.

Subject: 010 - AIR LAW						
Theoretical knowledge examination						
Exam length, total number of questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	1:00	0:45	1:00	0:45	0:45	0:45
Distribution of questions with regard to the topics of the syllabus						
010 01	3	2	3	3	2	XX
010 02	2	2	2	2	2	XX
010 03	1	1	1	1	1	XX
010 04	2	2	2	2	2	1
010 05	8	8	8	8	8	8
010 06	7	4	7	3	4	7
010 07	5	3	5	3	3	5
010 08	2	2	2	2	2	2
010 09	6	4	6	4	4	6
010 10	2	1	2	1	1	XX
010 11	2	2	2	2	2	XX
010 12	2	1	2	1	1	XX
010 13	2	1	2	1	1	XX
Total questions	44	33	44	33	33	29

Subject: 021 - AIRCRAFT GENERAL KNOWLEDGE - AIRFRAME/SYSTEMS/POWER PLANT						
Theoretical knowledge examination						
Exam length, total number of questions and distribution of questions						

	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	2:00	1:30	2:00	2:00	1:30	XX
Distribution of questions with regard to the topics of the syllabus						
021 01	04	02	04	04	02	XX
021 02	04	04	04	04	02	XX
021 03	05	02	04	04	03	XX
021 04	05	06	04	04	02	XX
021 05	07	04	06	06	03	XX
021 06	05	04	04	04	02	XX
021 07	04	04	02	02	02	XX
021 08	06	04	04	04	04	XX
021 09	06	06	06	06	04	XX
021 10	06	14	06	06	08	XX
021 11	20	06	20	20	13	XX
021 12	04	02	02	02	02	XX
021 13	04	02	XX	XX	XX	XX
021 14	XX	XX	01	01	01	XX
021 15	XX	XX	04	04	03	XX
021 16	XX	XX	06	06	05	XX
021 17	XX	XX	03	03	04	XX
Total questions	80	60	80	80	60	XX

Subject: 022 - AIRCRAFT GENERAL KNOWLEDGE - INSTRUMENTATION						
Theoretical knowledge examination						
Exam length, total number of questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	1:30	1:00	1:30	1:30	1:00	0:30
Distribution of questions with regard to the topics of the syllabus						
022 01	08	08	08	08	08	XX
022 02	08	06	08	08	06	06
022 03	04	04	04	04	04	04
022 04	04	05	06	06	05	04
022 05	05	XX	03	03	XX	XX
022 06	08	06	XX	XX	XX	XX
022 07	XX	XX	14	14	08	XX
022 08	03	02	XX	XX	XX	XX
022 09	02	XX	XX	XX	XX	XX
022 10	02	XX	XX	XX	XX	XX
022 11	04	XX	04	04	XX	XX
022 12	06	04	06	06	04	03
022 13	04	04	05	05	04	03
022 14	01	XX	01	01	XX	XX
022 15	01	XX	01	01	XX	XX

Total questions	60	39	60	60	39	20
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Subject: 031 - FLIGHT PERFORMANCE AND PLANNING - MASS AND BALANCE						
Theoretical knowledge examination						
Exam length, total number of questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	1:00	1:00	1:00	1:00	1:00	XX
Distribution of questions with regard to the topics of the syllabus						
031 01	03	03	03	03	03	XX
031 02	05	05	05	05	05	XX
031 03	05	05	05	05	05	XX
031 04	05	05	05	05	05	XX
031 05	05	05	05	05	05	XX
031 06	02	02	02	02	02	XX
Total questions	25	25	25	25	25	XX

Subject: 032 - FLIGHT PERFORMANCE AND PLANNING - PERFORMANCE (AEROPLANES)						
Theoretical knowledge examination						
Exam length, total number of questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	1:00	0:45	XX	XX	XX	XX
Distribution of questions with regard to the topics of the syllabus						
032 01	05	05	XX	XX	XX	XX
032 02	10	10	XX	XX	XX	XX
032 03	10	10	XX	XX	XX	XX
032 04	10	XX	XX	XX	XX	XX
Total questions	35	25	XX	XX	XX	XX

Subject: 033 - FLIGHT PERFORMANCE AND PLANNING - FLIGHT PLANNING AND MONITORING						
Theoretical knowledge examination						
Exam length, total number of questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	2:00	1:30	2:00	1:30	1:30	1:30
Distribution of questions with regard to the topics of the syllabus						
033 01	05	05	05	05	05	XX
033 02	10	XX	10	XX	XX	10

033 03	10	10	10	10	10	05
033 04	08	08	08	08	08	08
033 05	05	05	05	05	05	05
033 06	05	05	05	05	05	05
Total questions	43	33	43	33	33	33

Subject: 034 - FLIGHT PERFORMANCE AND PLANNING - PERFORMANCE (HELICOPTERS)						
Theoretical knowledge examination						
Exam length, total questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	XX	XX	1:00	1:00	0:45	XX
Distribution of questions with regard to the topics of the syllabus						
034 01	XX	XX	15	15	15	XX
034 02	XX	XX	05	05	05	XX
034 03	XX	XX	05	05	XX	XX
034 04	XX	XX	10	10	XX	XX
Total questions	XX	XX	35	35	20	XX

Subject: 040 - HUMAN PERFORMANCE						
Theoretical knowledge examination						
Exam length, total questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	1:00	0:45	1:00	1:00	0:45	0:45
Distribution of questions with regard to the topics of the syllabus						
040 01	02	01	02	02	01	01
040 02	33	26	33	33	26	26
040 03	13	09	13	13	09	09
Total questions	48	36	48	48	36	36

Subject: 050 - METEOROLOGY						
Theoretical knowledge examination						
Exam length, total questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	2:00	1:30	2:00	2:00	1:30	1:30
Distribution of questions with regard to the topics of the syllabus						
050 01	11	09	11	11	09	09
050 02	11	06	11	11	06	06
050 03	04	04	04	04	04	04

050 04	07	06	07	07	06	06
050 05	03	03	03	03	03	03
050 06	07	07	07	07	07	07
050 07	06	02	06	06	02	02
050 08	08	03	08	08	03	03
050 09	11	09	11	11	09	09
050 10	16	14	16	16	14	14
Total questions	84	63	84	84	63	63

Subject: 061 - GENERAL NAVIGATION						
Theoretical knowledge examination						
Exam length, total questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	2:00	1:30	2:00	2:00	1:30	XX
Distribution of questions with regard to the topics of the syllabus						
061 01	12	07	12	12	07	XX
061 02	04	04	04	04	04	XX
061 03	14	12	14	14	12	XX
061 04	16	11	16	16	11	XX
061 05	14	11	14	14	11	XX
Total questions	60	45	60	60	45	XX

Subject: 062 - RADIO NAVIGATION						
Theoretical knowledge examination						
Exam length, total questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	1:30	0:30	1:30	1:00	0:30	1:00
Distribution of questions with regard to the topics of the syllabus						
062 01	07	04	07	05	04	02
062 02	21	12	21	15	12	23
062 03	12	02	12	08	02	05
062 04	XX	XX	XX	XX	XX	XX
062 05	15	XX	15	XX	XX	10
062 06	11	04	11	06	04	04
Total questions	66	22	66	34	22	44

Subject: 070 - OPERATIONAL PROCEDURES						
Theoretical knowledge examination						
Exam length, total questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)

Time allowed (hours)	1:15	0:45	1:00	1:00	0:45	XX
Distribution of questions with regard to the topics of the syllabus						
071 01	25	18	18	18	14	XX
071 02	20	12	14	14	12	XX
071 03	XX	XX	06	06	04	XX
Total questions	45	30	38	38	30	XX

Subject: 081 - PRINCIPLES OF FLIGHT (AEROPLANES)						
Theoretical knowledge examination						
Exam length, total questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	1:00	0:45	XX	XX	XX	XX
Distribution of questions with regard to the topics of the syllabus						
081 01	17	14	XX	XX	XX	XX
081 02	06	XX	XX	XX	XX	XX
081 03	XX	XX	XX	XX	XX	XX
081 04	06	06	XX	XX	XX	XX
081 05	04	03	XX	XX	XX	XX
081 06	03	03	XX	XX	XX	XX
081 07	04	03	XX	XX	XX	XX
081 08	04	04	XX	XX	XX	XX
Total questions	44	33	XX	XX	XX	XX

Subject: 082 - PRINCIPLES OF FLIGHT (HELICOPTERS)						
Theoretical knowledge examination						
Exam length, total questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	XX	XX	1:00	1:00	1:00	XX
Distribution of questions with regard to the topics of the syllabus						
082 01	XX	XX	05	05	05	XX
082 02	XX	XX	03	03	03	XX
082 03	XX	XX	01	01	01	XX
082 04	XX	XX	12	12	12	XX
082 05	XX	XX	10	10	10	XX
082 06	XX	XX	05	05	05	XX
082 07	XX	XX	05	05	05	XX
082 08	XX	XX	03	03	03	XX
Total questions	XX	XX	44	44	44	XX

Subject: 091 - VFR COMMUNICATION						
Theoretical knowledge examination						
Exam length, total questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	00:30	00:30	00:30	00:30	00:30	XX
Distribution of questions with regard to the topics of the syllabus						
091 01	05	05	05	05	05	XX
091 02	11	11	11	11	11	XX
091 03	02	02	02	02	02	XX
091 04	02	02	02	02	02	XX
091 05	02	02	02	02	02	XX
091 06	02	02	02	02	02	XX
Total questions	24	24	24	24	24	XX

Subject: 092 - IFR COMMUNICATION						
Theoretical knowledge examination						
Exam length, total questions and distribution of questions						
	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	00:30	XX	00:30	XX	XX	00:30
Distribution of questions with regard to the topics of the syllabus						
092 01	05	XX	05	XX	XX	05
092 02	11	XX	11	XX	XX	11
092 03	02	XX	02	XX	XX	02
092 04	02	XX	02	XX	XX	02
092 05	02	XX	02	XX	XX	02
092 06	02	XX	02	XX	XX	02
092 07	XX	XX	XX	XX	XX	XX
Total questions	24	XX	24	XX	XX	24

AMC2 ARA.FCL.300(b) Examination procedures

THEORETICAL KNOWLEDGE EXAMINATIONS FOR THE EN-ROUTE INSTRUMENT RATING (EIR) AND THE INSTRUMENT RATING (IR) OBTAINED THROUGH THE COMPETENCY-BASED MODULAR TRAINING COURSE

The following tables contain the number of questions, the distribution of questions related to the different syllabus topics and the time allowed for the theoretical knowledge examination.

Subject: 010 — AIR LAW Theoretical knowledge examination Exam length and total questions
--

	EIR FCL.825 & IR(A) Appendix 6 Aa
Time allowed	0:30
Distribution of questions with regard to the topics of the syllabus	
010 04	01
010 05	05
010 06	06
010 07	03
010 08	01
010 09	02
Total questions	18

Subject: 022 — AIRCRAFT GENERAL KNOWLEDGE — INSTRUMENTATION	
Theoretical knowledge examination	
Exam length and total questions	
	EIR FCL.825 & IR(A) Appendix 6 Aa
Time allowed	0:20
Distribution of questions with regard to the topics of the syllabus	
022 02	05

Subject: 033 — FLIGHT PERFORMANCE AND PLANNING — FLIGHT PLANNING AND MONITORING	
Theoretical knowledge examination	
Exam length and total questions	
	EIR FCL.825 & IR(A) Appendix 6 Aa
Time allowed	0:40
Distribution of questions with regard to the topics of the syllabus	
033 02	10
033 03	4
033 04	7
033 05	5
Total questions	26

Subject: 040 — HUMAN PERFORMANCE	
Theoretical knowledge examination	
Exam length and total questions	
	EIR FCL.825 & IR(A) Appendix 6 Aa
Time allowed	0:20
Distribution of questions with regard to the topics of the syllabus	
040 01	01
040 02	07
040 03	04
Total questions	12

Subject: 050 — METEOROLOGY	
Theoretical knowledge examination	
Exam length and total questions	
	EIR FCL.825 & IR(A) Appendix 6 Aa
Time allowed	0:50
Distribution of questions with regard to the topics of the syllabus	
050 01	05

050 02	03
050 03	01
050 04	05
050 05	03
050 06	05
050 08	01
050 09	07
050 10	05
Total questions	35

'Subject: 062 — RADIO NAVIGATION

Theoretical knowledge examination

Exam length, total questions and distribution of questions

	ATPL(A)	CPL(A)	ATPL(H)/IR	ATPL(H)	CPL(H)	IR(A) & (H)
Time allowed (hours)	1:30	0:30	1:30	1:00	0:30	1:00

Distribution of questions with regard to the topics of the syllabus

062 01	07	04	07	05	04	02
062 02	21	12	21	15	12	23
062 03	12	02	12	08	02	05
062 04	XX	XX	XX	XX	XX	XX
062 05	10	XX	10	XX	XX	05
062 06	11	04	11	06	04	04
062 07	05	XX	05	XX	XX	05
Total questions	66	22	66	34	22	44'

Subject: 092 — IFR COMMUNICATION

Theoretical knowledge examination

Exam length and total questions

	EIR FCL.825 & IR(A) Appendix 6 Aa
Time allowed	0:30
Distribution of questions with regard to the topics of the syllabus	
092 01	05
092 02	10
092 03	02
092 04	02
092 05	02
092 06	02
Total questions	23

SUBPART CC - SPECIFIC REQUIREMENTS RELATING TO CABIN CREW

SECTION I - Cabin crew attestations

ARA.CC.100 Procedures for cabin crew attestations

- (a) The competent authority shall establish procedures for the issue, record-keeping and oversight of cabin crew attestations in accordance with ARA.GEN.315, ARA.GEN.220 and ARA.GEN.300 respectively.
- (b) Cabin crew attestations shall be issued, using the format and specifications established in Appendix II to this Part, either
- (1) by the competent authority;
and/or, if so decided by a Member State
 - (2) by an organisation approved to do so by the competent authority.
- (c) The competent authority shall make publicly available:
- (1) which body(ies) issue cabin crew attestations in their territory; and
 - (2) if organisations are approved to do so, the list of such organisations.

ARA.CC.105 Suspension or revocation of cabin crew attestations

The competent authority shall take measures in accordance with ARA.GEN.355, including the suspension or revocation of a cabin crew attestation, at least in the following cases:

- (a) non-compliance with Part-CC or with the applicable requirements of Part-ORO and Part-CAT, where a safety issue has been identified;
- (b) obtaining or maintaining the validity of the cabin crew attestation by falsification of submitted documentary evidence;
- (c) exercising the privileges of the cabin crew attestation when adversely affected by alcohol or drugs; and
- (d) evidence of malpractice or fraudulent use of the cabin crew attestation.

SECTION II - Organisations providing cabin crew training or issuing cabin crew attestations

ARA.CC.200 Approval of organisations to provide cabin crew training or to issue cabin crew attestations

- (a) Before issuing an approval to a training organisation or a commercial air transport operator to provide cabin crew training, the competent authority shall verify that:
- (1) the conduct, the syllabi and associated programmes of the training courses provided by the organisation comply with the relevant requirements of Part-CC;
 - (2) the training devices used by the organisation realistically represent the passenger compartment environment of the aircraft type(s) and the technical characteristics of the equipment to be operated by the cabin crew; and
 - (3) the trainers and instructors conducting the training sessions are suitably experienced and qualified in the training subject covered.
- (b) If in a Member State organisations may be approved to issue cabin crew attestations, the competent authority shall only grant such approvals to organisations complying with the requirements in (a). Before granting such an approval, the competent authority shall:
- (1) assess the capability and accountability of the organisation to perform the related tasks;
 - (2) ensure that the organisation has established documented procedures for the performance of the related tasks, including for the conduct of examination(s) by personnel who are qualified for this purpose and free from conflict of interest, and for the issue of cabin crew attestations in accordance with ARA.GEN.315 and ARA.CC.100(b); and
 - (3) require the organisation to provide information and documentation related to the cabin crew attestations it issues and their holders, as relevant for the competent authority to conduct its recordkeeping, oversight and enforcement tasks.

AMC1 ARA.CC.200(b)(2) Approval of organisations to provide cabin crew training or to issue cabin crew attestations

PERSONNEL CONDUCTING EXAMINATIONS

For any element being examined for the issue of a cabin crew attestation as required in Part-CC, the person who delivered the associated training or instruction should not also conduct the examination. However, if the organisation has appropriate procedures in place to avoid conflict of interest regarding the conduct of the examination and/or the results, this restriction need not apply.

SUBPART AeMC - SPECIFIC REQUIREMENTS RELATING TO AERO-MEDICAL CENTRES (AeMCs)

SECTION I – General

ARA.AeMC.110 Initial certification procedure

The certification procedure for an AeMC shall follow the provisions laid down in

ARA.GEN.310.ARA.AeMC.150 Findings and corrective actions – AeMC

Without prejudice to ARA.GEN.350, level 1 findings include, but are not limited to, the following:

- (a) failure to nominate a head of the AeMC;
- (b) failure to ensure medical confidentiality of aero-medical records; and
- (c) failure to provide the competent authority with the medical and statistical data for oversight purposes.

SUBPART MED - SPECIFIC REQUIREMENTS RELATING TO AERO-MEDICAL CERTIFICATION**SECTION I – General****ARA.MED.120 Medical assessors**

The competent authority shall appoint one or more medical assessor(s) to undertake the tasks described in this Section. The medical assessor shall be licensed and qualified in medicine and have:

- (a) postgraduate work experience in medicine of at least 5 years;
- (b) specific knowledge and experience in aviation medicine; and
- (c) specific training in medical certification.

AMC1 ARA.MED.120 Medical assessors**EXPERIENCE AND KNOWLEDGE**

Medical assessors should:

- (a) have considerable experience of aero-medical practice and have undertaken a minimum of 200 class 1 medical examinations or equivalent; and
- (b) maintain their medical professional competence in aviation medicine. The following should count towards maintaining medical professional competence:
 - (1) undertaking regular refresher training;
 - (2) participating in international aviation medicine conferences;
 - (3) undertaking research activities, including publication of results of the research.

AMC2 ARA.MED.120 Medical assessors**TASKS**

Medical assessors should:

- (a) provide lectures in basic, advanced and refresher training courses for aero-medical examiners (AMEs) and aero-medical centres (AeMCs);
- (b) carry out supervision and audits of AeMCs, AMEs and AME training facilities; and
- (c) perform the aero-medical assessment of applicants for, or holders of, medical certificates after referral to the licensing authority.

ARA.MED.125 Referral to the licensing authority

When an AeMC, or aero-medical examiner (AME) has referred the decision on the fitness of an applicant to the licensing authority:

- (a) the medical assessor or medical staff designated by the competent authority shall evaluate the relevant medical documentation and request further medical documentation, examinations and tests where necessary; and
- (b) the medical assessor shall determine the applicant's fitness for the issue of a medical certificate with one or more limitation(s) as necessary.

AMC1 ARA.MED.125 Referral to the licensing authority**REFERRAL TO THE LICENSING AUTHORITY**

- (a) The licensing authority should supply the AeMC or AME with all necessary information that led to the decision on aero-medical fitness.
- (b) The licensing authority should ensure that unusual or borderline cases are evaluated on a common basis.

ARA.MED.130 Medical certificate format

The medical certificate shall conform to the following specifications:

[Go back to Subpart MED](#)[Go back to the content](#)**(a) Content**

- (1) State where the pilot licence has been issued or applied for (I),
- (2) Class of medical certificate (II),
- (3) Certificate number commencing with the UN country code of the State where the pilot licence has been issued or applied for and followed by a code of numbers and/or letters in Arabic numerals and latin script (III),
- (4) Name of holder (IV),
- (5) Nationality of holder (VI),
- (6) Date of birth of holder: (dd/mm/yyyy) (XIV),
- (7) Signature of holder (VII),
- (8) Limitation(s) (XIII),
- (9) Expiry date of the medical certificate (IX) for:
 - (i) Class 1 single pilot commercial operations carrying passengers,
 - (ii) Class 1 other commercial operations,
 - (iii) Class 2,
 - (iv) LAPL
- (10) Date of medical examination
- (11) Date of last electrocardiogram
- (12) Date of last audiogram
- (13) Date of issue and signature of the AME or medical assessor that issued the certificate. GMP may be added to this field if they have the competence to issue medical certificates under the national law of the Member State where the licence is issued.
- (14) Seal or stamp (XI)

(b) Material: Except for the case of LAPL issued by a GMP the paper or other material used shall prevent or readily show any alterations or erasures. Any entries or deletions to the form shall be clearly authorised by the licensing authority.

(c) Language: Certificates shall be written in the national language(s) and in English and such other languages as the licensing authority deems appropriate.

(d) All dates on the medical certificate shall be written in a dd/mm/yyyy format.

AMC1 ARA.MED.130 Medical certificate format**STANDARD EASA MEDICAL CERTIFICATE FORMAT**

The format of the medical certificate should be as shown below.

<p>Competent authority name and logo (English and any language(s) determined by the competent authority)</p> <p>EUROPEAN UNION (English only)</p> <p>Class 1/2/LAPL MEDICAL CERTIFICATE pertaining to a Part-FCL licence (English and any language(s) determined by the competent authority)</p> <p>Issued in accordance with Part-MED This medical certificate complies with ICAO standards, except for the LAPL medical certificate (English and any language(s) determined by the competent authority)</p>	<p>Requirements</p> <p>"European Union" to be deleted for non-EU Member States</p> <p>Size of each page shall be one eighth A4</p>
--	--

I	National language(s)/ <i>Authority that issued or is to issue the pilot licence</i>
III	National language(s):/Certificate number
IV	National language(s):/ Last and first name of holder:
XIV	National language(s):/ <i>Date of birth: (dd/mm/yyyy)</i>
VI	National language(s)/ <i>Nationality:</i>
VII	National language(s)/ Signature of holder:
2	

XIII	National language(s)/ <i>Limitations:</i> Code. Description :
X	National language(s)/* <i>Date of issue:</i> (dd/mm/yyyy) Signature of issuing AME/medical assessor /(GMP):
XI	National language(s)/ <i>Stamp:</i>
3	

	IX Nat. lang(s)/ Expiry date of this certificate	Class 1 single pilot commercial operations carrying passengers (dd/mm/yyyy)	
		Class 1 (dd/mm/yyyy)	
		Class 2 (dd/mm/yyyy)	
		LAPL (dd/mm/yyyy)	
	Nat. lang(s)/Examination date: (dd/mm/yyyy)		

[Go back to Subpart MED](#)[Go back to the content](#)**MED.A.020 Decrease in medical fitness**

(a) Licence holders shall not exercise the privileges of their licence and related ratings or certificates at any time when they:

- (1) are aware of any decrease in their medical fitness that might render them unable to safely exercise those privileges;
- (2) take or use any prescribed or non-prescribed medication that is likely to interfere with the safe exercise of the privileges of the applicable licence; or
- (3) receive any medical, surgical or other treatment that is likely to interfere with flight safety.

(b) In addition, licence holders shall, without undue delay, seek aero-medical advice when they:

- (1) have undergone a surgical operation or invasive procedure;
- (2) have commenced the regular use of any medication;
- (3) have suffered any significant personal injury involving incapacity to function as a member of the flight crew;
- (4) have been suffering from any significant illness involving incapacity to function as a member of the flight crew;
- (5) are pregnant;
- (6) have been admitted to hospital or medical clinic; or
- (7) first require correcting lenses.

4

* Date of issue is the date the certificate is issued and signed

ARA.MED.135 Aero-medical forms

The competent authority shall use forms for:

- (a) the application form for a medical certificate;
- (b) the examination report form for class 1 and class 2 applicants; and
- (c) the examination report form for light aircraft pilot licence (LAPL) applicants.

AMC1 ARA.MED.135(a) Aero-medical forms**APPLICATION FORM FOR A MEDICAL CERTIFICATE**

The form referred to in ARA.MED.135 (a) should reflect the information indicated in the following form and corresponding instructions for completion.

LOGO

CIVIL AVIATION ADMINISTRATION/MEMBER STATE

APPLICATION FORM FOR A MEDICAL CERTIFICATE MEDICAL IN CONFIDENCE

Complete this page fully and in block capitals - Refer to instructions for completion.

(1) State of licence issue:	(2) Medical certificate applied for: class 1 <input type="checkbox"/> class 2 <input type="checkbox"/> LAPL <input type="checkbox"/>		
(3) Surname:	(4) Previous surname(s):	(12) Application: Initial <input type="checkbox"/> Revalidation/Renewal <input type="checkbox"/>	
(5) Forename(s):	(6) Date of birth(dd/mm/yyyy):	(7) Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	(13) Reference number:
(8) Place and country of birth:	(9) Nationality:	(14) Type of licence applied for:	
(10) Permanent address: Country: Telephone No.: Mobile No.: E-mail:	(11) Postal address (if different): Country: Telephone No.:	(15) Occupation (principal):	
		(16) Employer:	
		(17) Last medical examination: Date: Place:	
(18) Licence(s) held (type): Licence number: State of issue:	(19) Any limitations on licence(s)/medical certificate held No <input type="checkbox"/> Yes <input type="checkbox"/> Details:		
(20) Have you ever had a medical certificate denied, suspended or revoked by any licensing authority? No <input type="checkbox"/> Yes <input type="checkbox"/> Date: Country:	(21) Flight time total:	(22) Flight time since last medical:	

[Go back to Subpart MED](#)[Go back to the content](#)

Details:			
		(23) Aircraft class/type(s) presently flown:	
(24) Any aviation accident or reported incident since last medical examination? No <input type="checkbox"/> Yes <input type="checkbox"/> Date: _____ Place: _____ Details:	(25) Type of flying intended:		
		(26) Present flying activity: Single pilot <input type="checkbox"/> Multi pilot <input type="checkbox"/>	
(27) Do you drink alcohol? <input type="checkbox"/> No <input type="checkbox"/> Yes, amount _____	(28) Do you currently use any medication? No <input type="checkbox"/> Yes <input type="checkbox"/> State medication, dose, date started and why:		
(29) Do you smoke tobacco? <input type="checkbox"/> No, never <input type="checkbox"/> No, date stopped: _____ <input type="checkbox"/> Yes, state type and amount: _____			

General and medical history: Do you have, or have you ever had, any of the following? (Please tick). If yes, give details in remarks section (30).

Yes		No		Yes		No		Yes		No		Family history of:		Yes		No	
101 Eye trouble/eye operation				112 Nose, throat or speech disorder				123 Malaria or other tropical disease				170 Heart disease					
102 Spectacles and/or contact lenses ever worn				113 Head injury or concussion				124 A positive HIV test				171 High blood pressure					
				114 Frequent or severe headaches				125 Sexually transmitted disease				172 High cholesterol level					
103 Spectacle/contact lens prescriptions change since last medical exam.				115 Dizziness or fainting spells				126 Sleep disorder/apnoea syndrome				173 Epilepsy					
				116 Unconsciousness for any reason				127 Musculoskeletal illness/impairment				174 Mental illness					
104 Hay fever, other allergy				117 Neurological disorders; stroke, epilepsy, seizure, paralysis, etc.				128 Any other illness or injury				175 Diabetes					
105 Asthma, lung disease								129 Admission to hospital				176 Tuberculosis					
106 Heart or vascular trouble				118 Psychological/psychiatric trouble of any sort				130 Visit to medical practitioner since last medical examination				177 Allergy/asthma/eczema					
107 High or low blood pressure								131 Refusal of life insurance				178 Inherited disorders					
108 Kidney stone or blood in urine				119 Alcohol/drug/substance abuse				132 Refusal of flying licence				179 Glaucoma					
109 Diabetes, hormone disorder				120 Attempted suicide													
				121 Motion sickness requiring medication				133 Medical rejection from or for military service									
110 Stomach, liver or intestinal trouble																	
				122 Anaemia/sickle cell trait/other blood disorders				134 Award of pension or compensation for injury or illness									
111 Deafness, ear disorder																	
(30) Remarks: If previously reported and no change since, so state.																	
(31) Declaration: I hereby declare that I have carefully considered the statements made above and to the best of my belief they are complete and correct and that I have not withheld any relevant information or made any misleading statements. I understand that, if I have made any false or misleading statements in connection with this application, or fail to release the supporting medical information, the licensing authority may refuse to grant me a medical certificate or may withdraw any medical certificate granted, without prejudice to any other action applicable under national law. CONSENT TO RELEASE OF MEDICAL INFORMATION: I hereby authorise the release of all information contained in this report and any or all attachments to the AME and, where necessary, to the medical assessor of the licensing authority, recognising that these documents or electronically stored data are to be used for completion of a medical assessment and will become and remain the property of the licensing authority, providing that I or my physician may have access to them according to national law. Medical confidentiality will be respected at all times.																	
Date				Signature of applicant				Signature of AME/(GMP)/(medical assessor)									

INSTRUCTIONS FOR COMPLETION OF THE APPLICATION FORM FOR A MEDICAL CERTIFICATE

This application form and all attached report forms will be transmitted to the licensing authority. Medical confidentiality shall be respected at all times.

The applicant should personally complete, in full, all questions (sections) on the application form. Writing should be legible and in block capitals, using a ball-point pen. Completion of this form by typing/printing is also acceptable. If more space is required to answer any questions, a plain sheet of paper should be used, bearing the applicant's name and signature, and the date of signing. The following numbered instructions apply to the numbered headings on the application form for a medical certificate.

Failure to complete the application form in full, or to write legibly, may result in non-acceptance of the application form. The making of false or misleading statements or the withholding of relevant information in respect of this application may result in criminal prosecution, denial of this application and/or withdrawal of any medical certificate(s) granted.

1. LICENSING AUTHORITY: State name of country this application is to be forwarded to.	17. LAST APPLICATION FOR A MEDICAL CERTIFICATE: State date (day, month, year) and place (town, country) Initial applicants state 'NONE'.
2. MEDICAL CERTIFICATE APPLIED FOR: Tick appropriate box. Class 1: Professional Pilot Class 2: Private Pilot LAPL	18. LICENCE(S) HELD (TYPE): State type of licence(s) held. Enter licence number and State of issue. If no licences are held, state 'NONE'.
3. SURNAME: State surname/family name.	19. ANY LIMITATIONS ON THE LICENCE(S)/MEDICAL CERTIFICATE: Tick appropriate box and give details of any limitations on your licence(s)/medical certificate, e.g. vision, colour vision, safety pilot, etc.
4. PREVIOUS SURNAME(S):	20. MEDICAL CERTIFICATE DENIAL, SUSPENSION OR REVOCATION:

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If your surname or family name has changed for any reason, state previous name(s).	Tick 'YES' box if you have ever had a medical certificate denied, suspended or revoked, even if only temporary. If 'YES', state date (dd/mm/yyyy) and country where it occurred.
5. FORENAME(S): State first and middle names (maximum three).	21. FLIGHT TIME TOTAL: State total number of hours flown.
6. DATE OF BIRTH: Specify in order dd/mm/yyyy.	22. FLIGHT TIME SINCE LAST MEDICAL: State number of hours flown since your last medical examination.
7. SEX: Tick appropriate box.	23. AIRCRAFT CLASS/TYPE(S) PRESENTLY FLOWN: State name of principal aircraft flown, e.g. Boeing 737, Cessna 150, etc.
8. PLACE AND COUNTRY OF BIRTH: State town and country of birth.	24. ANY AVIATION ACCIDENT OR REPORTED INCIDENT SINCE LAST MEDICAL EXAMINATION: If 'YES' box ticked, state date (dd/mm/yyyy) and country of accident/incident.
9. NATIONALITY: State name of country of citizenship.	25. TYPE OF FLYING INTENDED: State whether airline, charter, single-pilot, commercial air transport, carrying passengers, agriculture, pleasure, etc.
10. PERMANENT ADDRESS: State permanent postal address and country. Enter telephone area code as well as telephone number.	26. PRESENT FLYING ACTIVITY: Tick appropriate box to indicate whether you fly as the SOLE pilot or not.
11. POSTAL ADDRESS (IF DIFFERENT): If different from permanent address, state full current postal address including telephone number and area code. If the same, enter 'SAME'.	27. DO YOU DRINK ALCOHOL? Tick applicable box. If yes, state weekly alcohol consumption e.g. 2 litres beer.
12. APPLICATION: Tick appropriate box.	28. DO YOU CURRENTLY USE ANY MEDICATION?: If 'YES', give full details - name, how much you take and when, etc. Include any non-prescription medication.
13. REFERENCE NUMBER: State reference number allocated to you by the licensing authority Initial applicants enter 'NONE'.	29. DO YOU SMOKE TOBACCO? Tick applicable box. Current smokers state type (cigarettes, cigars, pipe) and amount (e.g. 2 cigars daily; pipe – 1 oz. weekly)
14. TYPE OF LICENCE APPLIED FOR: State type of licence applied for from the following list: Aeroplane Transport Pilot Licence Multi-Pilot Licence Commercial Pilot Licence/Instrument Rating Commercial Pilot Licence Private Pilot Licence/Instrument Rating Private Pilot Licence Sailplane Pilot Licence Balloon Pilot Licence Light Aircraft Pilot Licence And whether Fixed Wing / Rotary Wing / Both Other – Please specify	GENERAL AND MEDICAL HISTORY All items under this heading from number 101 to 179 inclusive should have the answer 'YES' or 'NO' ticked. You should tick 'YES' if you have ever had the condition in your life and describe the condition and approximate date in the (30) remarks section. All questions asked are medically important even though this may not be readily apparent. Items numbered 170 to 179 relate to immediate family history, whereas items numbered 150 to 151 should be answered by female applicants only. If information has been reported on a previous application form for a medical certificate and there has been no change in your condition, you may state 'Previously reported; no change since'. However, you should still tick 'YES' to the condition. Do not report occasional common illnesses such as colds.
15. OCCUPATION (PRINCIPAL): Indicate your principal employment.	31. DECLARATION AND CONSENT TO OBTAINING AND RELEASING INFORMATION: Do not sign or date these declarations until indicated to do so by the AME/GMP who will act as witness and sign accordingly.
16. EMPLOYER: If principal occupation is pilot, then state employer's name or if self-employed, state 'self'.	

AMC1 ARA.MED.135(b);(c) Aero-medical forms

MEDICAL EXAMINATION REPORT FORMS

The forms referred to in ARA.MED.135 (b) and (c) should reflect the information indicated in the following forms and corresponding instructions for completion.

MEDICAL EXAMINATION REPORT FORM FOR CLASS 1 & CLASS 2 APPLICANTS

(201) Examination category Initial <input type="checkbox"/> Revalidation <input type="checkbox"/> Renewal <input type="checkbox"/> Special referral <input type="checkbox"/>	(202) Height (cm)	(203) Weight (kg)	(204) Colour eye	(205) Colour hair	(206) Blood pressure-seated (mmHg)		(207) Pulse - resting	
					Systolic	Diastolic	Rate (bpm)	Rhythm: regular <input type="checkbox"/> irregular <input type="checkbox"/>

Clinical exam: Check each item		Normal	Abnormal	Normal	Abnormal
(208) Head, face, neck, scalp				(218) Abdomen, hernia, liver, spleen	
(209) Mouth, throat, teeth				(219) Anus, rectum	
(210) Nose, sinuses				(220) Genito-urinary system	
(211) Ears, drums, eardrum motility				(221) Endocrine system	
(212) Eyes - orbit & adnexa; visual fields				(222) Upper & lower limbs, joints	
(213) Eyes - pupils and optic fundi				(223) Spine, other musculoskeletal	
(214) Eyes - ocular motility; nystagmus				(224) Neurologic - reflexes, etc.	
(215) Lungs, chest, breasts				(225) Psychiatric	
(216) Heart				(226) Skin, identifying marks and lymphatics	
(217) Vascular system				(227) General systemic	
(228) Notes: Describe every abnormal finding. Enter applicable item number before each comment.					

Visual acuity

Distant vision at 5m/6m

	Uncorrected		Spectacles	Contact lenses
Right eye		Corr. to		
Left eye		Corr. to		
Both eyes		Corr. to		

(236) Pulmonary function

(237) Haemoglobin

FEV ₁ /FVC _____ %	_____ (unit)
Normal <input type="checkbox"/> Abnormal <input type="checkbox"/>	Normal <input type="checkbox"/> Abnormal <input type="checkbox"/>

(230) <i>Intermediate vision</i> N14 at 100 cm	Uncorrected		Corrected	
	Yes	No	Yes	No
Right eye				
Left eye				
Both eyes				

(235) **Urinalysis** Normal Abnormal

Glucose	Protein	Blood	Other
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(231) <i>Near vision</i> N5 at 30-50 cm	Uncorrected		Corrected	
	Yes	No	Yes	No
Right eye				
Left eye				
Both eyes				

Accompanying reports

	Not performed	Normal	Abnormal/Comment
(238) ECG			
(239) Audiogram			
(240) Ophthalmology			
(241) ORL (ENT)			
(242) Blood lipids			
(243) Pulmonary function			
(244) Other (what?)			

(232) Spectacles Yes <input type="checkbox"/> No <input type="checkbox"/>		(233) Contact lenses Yes <input type="checkbox"/> No <input type="checkbox"/>		
Type:		Type:		
Refraction	Sph	Cyl	Axis	Add
Right eye				
Left eye				

(247) **AME recommendation:**

Name of applicant: _____ Date of birth: _____ Reference number: _____

Fit for class: _____

Medical certificate issued by undersigned (copy attached) for class: _____

Unfit for class: _____

Deferred for further evaluation. If yes, why and to whom?

(248) **Comments, limitations**

(313) Colour perception	Normal <input type="checkbox"/>	Abnormal <input type="checkbox"/>		
Pseudo-isochromatic plates	Type: Ishihara (24 plates)			
No of plates:	No of errors:			
(234) Hearing	Right ear	Left ear		
(when 239/241 not performed)				
Conversational voice test (2m) with back turned to examiner	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Audiometry				
Hz	500	1000	2000	3000
Right				
Left				

AME declaration:

[Go back to Subpart MED](#)
[Go back to the content](#)

I hereby certify that I/my AME group have personally examined the applicant named on this medical examination report and that this report with any attachment embodies my findings completely and correctly.		
(250) Place and date:	AME name and address:	AME certificate No.:
AME signature:	E-mail: Telephone No.: Telefax No.:	

Shaded areas do not require completion

MEDICAL EXAMINATION REPORT FORM FOR LAPL APPLICANT

MEDICAL IN CONFIDENCE

(201) Examination category Initial <input type="checkbox"/> Revalidation <input type="checkbox"/> Renewal <input type="checkbox"/> Special referral <input type="checkbox"/>	(202) Height (cm)	(203) Weight (kg)	(204) Colour eye	(205) Colour hair	(206) Blood pressure-seated (mmHg) Systolic Diastolic	(207) Pulse - resting Rate (bpm) Rhythm: regular <input type="checkbox"/> irregular <input type="checkbox"/>
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Clinical exam: Check each item		Normal	Abnormal	Normal	Abnormal
(208) Head, face, neck, scalp				(218) Abdomen, hernia, liver, spleen	
(209) Mouth, throat, teeth				(219) Anus, rectum	
(210) Nose, sinuses				(220) Genito-urinary system	
(211) Ears, drums, eardrum motility				(221) Endocrine system	
(212) Eyes - orbit & adnexa; visual fields				(222) Upper & lower limbs, joints	
(213) Eyes - pupils and optic fundi				(223) Spine, other musculoskeletal	
(214) Eyes - ocular motility; nystagmus				(224) Neurologic - reflexes, etc.	
(215) Lungs, chest, breasts				(225) Psychiatric	
(216) Heart				(226) Skin, identifying marks and lymphatics	
(217) Vascular system				(227) General systemic	
(228) Notes: Describe every abnormal finding. Enter applicable item number before each comment.					

Visual acuity

(229) Distant vision at 5m/6m

	Uncorrected		Spectacles	Contact lenses
Right eye		Corr. to		
Left eye		Corr. to		
Both eyes		Corr. to		

(236) **Pulmonary function**

(237) **Haemoglobin**

FEV ₁ /FVC _____ %	_____ (unit)
Normal <input type="checkbox"/> Abnormal <input type="checkbox"/>	Normal <input type="checkbox"/> Abnormal <input type="checkbox"/>

(235) **Urinalysis** Normal Abnormal

Glucose	Protein	Blood	Other
---------	---------	-------	-------

Accompanying reports

	Not performed	Normal	Abnormal/Comment
(238) ECG			
(239) Audiogram			
(240) Ophthalmology			
(241) ORL (ENT)			
(242) Blood lipids			
(243) Pulmonary function			
(244) Other (what?)			

(247) **AME/GMP recommendation:**

Name of applicant:	Date of birth:	Reference number:
_____	_____	_____
<input type="checkbox"/> Fit for medical certificate for LAPL <input type="checkbox"/> Medical certificate issued by undersigned (copy attached) for LAPL <input type="checkbox"/> Unfit for class: _____ <input type="checkbox"/> Deferred for further evaluation. If yes, why and to whom?		

(248) **Comments, limitations**

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(230) **Intermediate vision** N14 at 100 cm

	Uncorrected	Corrected
	Yes No	Yes No
Right eye		
Left eye		
Both eyes		

(231) **Near vision** N5 at 30-50 cm

	Uncorrected	Corrected
	Yes No	Yes No
Right eye		
Left eye		
Both eyes		

(232) **Spectacles** Yes No Type: _____

(233) **Contact lenses** Yes No Type: _____

Refraction	Sph	Cyl	Axis	Add
Right eye				
Left eye				

(313) **Colour perception** Normal Abnormal
 Pseudo-isochromatic plates Type: Ishihara (24 plates)
 No of plates: _____ No of errors: _____

(234) **Hearing** (when 239/241 not performed)

	Right ear	Left ear
Conversational voice test (2m) with back turned to examiner	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Audiometry				
Hz	500	1000	2000	3000
Right				
Left				

(249) AME/GMP declaration:

I hereby certify that I have personally examined the applicant named on this medical examination report and that this report with any attachment embodies my findings completely and correctly.		
(250) Place and date:	AME/GMP name and address:	AME certificate No./GMP identification No.:
AME/GMP signature:	E-mail: Telephone No.: Telefax No.:	

INSTRUCTIONS FOR COMPLETION OF THE MEDICAL EXAMINATION REPORT FORMS

The AME performing the examination should verify the identity of the applicant.

All questions (sections) on the medical examination report form should be completed in full. If an otorhinolaryngology examination report form is attached, then questions 209, 210, 211, and 234 may be omitted. If an ophthalmology examination report form is attached, then questions 212, 213, 214, 229, 230, 231, 232, and 233 may be omitted.

Writing should be legible and in block capitals using a ball-point pen. Completion of this form by typing/printing is also acceptable. If more space is required to answer any question, a plain sheet of paper should be used, bearing the applicant's name, the AME's name and signature, and the date of signing. The following numbered instructions apply to the numbered headings on the medical examination report form.

Failure to complete the medical examination report form in full, as required, or to write legibly, may result in non-acceptance of the application in total and may lead to withdrawal of any medical certificate issued. The making of false or misleading statements or the withholding of relevant information by an AME may result in criminal prosecution, denial of an application or withdrawal of any medical certificate(s) granted.

Shaded areas do not require completion for the medical examination report form for the LAPL.

201 EXAMINATION CATEGORY – Tick appropriate box.

Initial – Initial examination for either LAPL, class 1 or 2; also initial examination for upgrading from LAPL to class 2, or class 2 to 1 (notate 'upgrading' in box 248).

Renewal/Revalidation – Subsequent ROUTINE examinations.

Extended Renewal/Revalidation – Subsequent ROUTINE examinations, which include comprehensive ophthalmological and otorhinolaryngology examinations.

202 HEIGHT – Measure height, without shoes, in centimetres to nearest cm.

203 WEIGHT – Measure weight, in indoor clothes, in kilograms to nearest kg.

204 COLOUR EYE – State colour of applicant's eyes from the following list: brown, blue, green, hazel, grey, multi.

205 COLOUR HAIR – State colour of applicant's hair from the following list: brown, black, red, fair, bald.

206 BLOOD PRESSURE – Blood pressure readings should be recorded as Phase 1 for Systolic pressure and Phase 5 for Diastolic pressure. The applicant should be seated and rested. Recordings in mm Hg.

207 PULSE (RESTING) – The pulse rate should be recorded in beats per minute and the rhythm should be recorded as regular or irregular. Further comments if necessary may be written in section 228, 248 or separately.

208 to 227 inclusive constitute the general clinical examination, and each of the boxes should be marked (with a tick) as normal or abnormal.

208 HEAD, FACE, NECK, SCALP – To include appearance, range of neck and facial movements, symmetry, etc.

209 MOUTH, THROAT, TEETH – To include appearance of buccal cavity, palate motility, tonsillar area, pharynx and also gums, teeth and tongue.

210 NOSE, SINUSES – To include appearance and any evidence of nasal obstruction or sinus tenderness on palpation.

211 EARS, DRUMS, EARDRUM MOTILITY – To include otoscopy of external ear, canal, tympanic membrane. Eardrum motility by valsalva manoeuvre or by pneumatic otoscopy.

212 EYES – ORBIT AND ADNEXA; VISUAL FIELDS – To include appearance, position and movement of eyes and their surrounding structures in general, including eyelids and conjunctiva. Visual fields check by campimetry, perimetry or confrontation.

213 EYES – PUPILS AND OPTIC FUNDI – To include appearance, size, reflexes, red reflex and fundoscopy. Special note of corneal scars.

214 EYES – OCULAR MOTILITY, NYSTAGMUS – To include range of movement of eyes in all directions; symmetry of movement of both eyes; ocular muscle balance; convergence; accommodation; signs of nystagmus.

215 LUNGS, CHEST, BREASTS – To include inspection of chest for deformities, operation scars, abnormality of respiratory movement, auscultation of breath sounds. Physical examination of female applicant's breasts should only be performed with informed consent.

- 216 HEART – To include apical heartbeat, position, auscultation for murmurs, carotid bruits, palpation for thrills.
- 217 VASCULAR SYSTEM – To include examination for varicose veins, character and feel of pulse, peripheral pulses, evidence of peripheral circulatory disease.
- 218 ABDOMEN, HERNIA, LIVER, SPLEEN – To include inspection of abdomen; palpation of internal organs; check for inguinal hernias in particular.
- 219 ANUS, RECTUM – Examination only with informed consent.
- 220 GENITO-URINARY SYSTEM – To include renal palpation; inspection palpation male/female reproductive organs only with informed consent.
- 221 ENDOCRINE SYSTEM – To include inspection, palpation for evidence of hormonal abnormalities/imbalance; thyroid gland.
- 222 UPPER AND LOWER LIMBS, JOINTS – To include full range of movements of joints and limbs, any deformities, weakness or loss. Evidence of arthritis.
- 223 SPINE, OTHER MUSCULOSKELETAL – To include range of movements, abnormalities of joints.
- 224 NEUROLOGIC – REFLEXES ETC. To include reflexes, sensation, power, vestibular system – balance, romberg test, etc.
- 225 PSYCHIATRIC – To include appearance, appropriate mood/thought, unusual behaviour.
- 226 SKIN, IDENTIFYING MARKS AND LYMPHATICS – To include inspection of skin; inspection, palpation for lymphadenopathy, etc. Briefly describe scars, tattoos, birthmarks, etc. which could be used for identification purposes.
- 227 GENERAL SYSTEMIC – All other areas, systems and nutritional status.
- 228 NOTES – Any notes, comments or abnormalities to be described – extra notes if required on separate sheet of paper, signed and dated.
- 229 DISTANT VISION AT 5/6 METRES – Each eye to be examined separately and then both together. First without correction, then with spectacles (if used) and lastly with contact lenses, if used. Record visual acuity in appropriate boxes. Visual acuity to be tested at either 5 or 6 metres with the appropriate chart for the distance.
- 230 INTERMEDIATE VISION AT 100 CM – Each eye to be examined separately and then both together. First without correction, then with spectacles if used and lastly with contact lenses if used. Record visual acuity in appropriate boxes as ability to read N14 at 100 cm (Yes/No).
- 231 NEAR VISION AT 30-50 CM. – Each eye to be examined separately and then both together. First without correction, then with spectacles if used and lastly with contact lenses, if used. Record visual acuity in appropriate boxes as ability to read N5 at 30-50 cm (Yes/No).
- Note: Bifocal contact lenses and contact lenses correcting for near vision only are not acceptable.
- 232 SPECTACLES – Tick appropriate box signifying if spectacles are or are not worn by applicant. If used, state whether unifocal, bifocal, varifocal or look-over.
- 233 CONTACT LENSES – Tick appropriate box signifying if contact lenses are or are not worn. If worn, state type from the following list; hard, soft, gas-permeable or disposable.
- 234 COLOUR PERCEPTION – Tick appropriate box signifying if colour perception is normal or not. If abnormal; state number of plates of the first 15 of the pseudo-isochromatic plates (Ishihara 24 plates) have not been read correctly.
- 234 HEARING – Tick appropriate box to indicate hearing level ability as tested separately in each ear at 2 m.
- 235 URINALYSIS – State whether result of urinalysis is normal or not by ticking appropriate box. If no abnormal constituents, state NIL in each appropriate box.
- 236 PULMONARY FUNCTION – When required or on indication, state actual FEV₁/FVC value obtained in % and state if normal or not with reference to height, age, sex and race.
- 237 HAEMOGLOBIN – Enter actual haemoglobin test result and state units used. Then state whether normal value or not, by ticking appropriate box.
- 238 to 244 inclusive: ACCOMPANYING REPORTS – One box opposite each of these sections must be ticked. If the test is not required and has not been performed, then tick the NOT PERFORMED box. If the test has been performed (whether required or on indication) complete the normal or abnormal box as appropriate. In the case of question 244, the number of other accompanying reports must be stated.
- 247 AME RECOMMENDATION – The applicant's name, date of birth and reference number, should be entered here in block capitals. The applicable class of medical certificate should be indicated by a tick in the appropriate box. If a fit assessment is recommended and a medical certificate has been issued, this should be indicated in the appropriate box. An applicant may be recommended as fit for a lower class of medical certificate (e.g. class 2), but also be deferred or recommended as unfit for a higher class of medical certificate (e.g. class 1). If an unfit recommendation is made, applicable Part-MED paragraph references should be entered. If an applicant is deferred for further evaluation, the reason and the doctor or licensing authority to whom the applicant is referred should be indicated.
- 248 COMMENTS, LIMITATIONS, ETC. – The AME's findings and assessment of any abnormality in the history or examination, should be entered here. The AME should also state any limitation required.
- 249 AME DETAILS – The AME should sign the declaration, complete his/her name and address in block capitals, contact details and lastly stamp the relevant section with his/her designated AME stamp incorporating his/her AME number. The GMP identification no. is the number provided by the national medical system.
- 250 PLACE AND DATE – The place (town or city) and the date of examination should be entered here. The date of examination is the date of the general examination and not the date of finalisation of the form. If the medical examination report is finalised on a different date, the date of finalisation should be entered in section 248 as 'Report finalised on'.

GM1 ARA.MED.135 (b);(c) Aero-medical forms

OPHTHALMOLOGY AND OTORHINOLARYNGOLOGY EXAMINATION REPORT FORMS

The ophthalmology and otorhinolaryngology examination report forms may be used as indicated in the following forms and corresponding instructions for completion.

OPHTHALMOLOGY EXAMINATION REPORT FORM

Complete this page fully and in block capitals – Refer to instructions for completion.

MEDICAL IN CONFIDENCE

Applicant's details

(1) State applied to:	(2) Medical certificate applied for: class 1 <input type="checkbox"/> class 2 <input type="checkbox"/>	
(3) Surname:	(4) Previous surname(s):	(12) Application: Initial <input type="checkbox"/> Revalidation/Renewal <input type="checkbox"/>
(5) Forename(s):	(6) Date of birth:	(7) Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>
(13) Reference number:		
(301) Consent to release of medical information: I hereby authorise the release of all information contained in this report and any or all attachments to the AME and, where necessary, to the medical assessor of the licensing authority, recognising that these documents or electronically stored data, are to be used for completion of a medical assessment and will become and remain the property of the licensing authority, providing that I or my physician may have access to them according to national law. Medical confidentiality will be respected at all times.		
..... Date Signature of applicant Signature of AME

(302) Examination category:	(303) Ophthalmological history:
Initial <input type="checkbox"/>	
Revalidation <input type="checkbox"/>	
Renewal <input type="checkbox"/>	
Special referral <input type="checkbox"/>	

Clinical examination

Check each item	Normal	Abnormal
(304) Eyes, external & eyelids		
(305) Eyes, Exterior (slit lamp, ophth.)		
(306) Eye position and movements		
(307) Visual fields (confrontation)		
(308) Pupillary reflexes		
(309) Fundi (Ophthalmoscopy)		
(310) Convergence	cm	
(311) Accommodation	D	

(312) Ocular muscle balance (in prisme dioptres)

Distant at 5m/6m	Near at 30-50 cm
Ortho	Ortho
Eso	Eso
Exo	Exo
Hyper	Hyper
Cyclo	Cyclo
Tropia Yes No	Phoria Yes No
Fusional reserve testing Not performed	Normal Abnormal

(313) Colour perception

Pseudo-Isochromatic plates	Type: Ishihara (24 plates)
No of plates:	No of errors:
Advanced colour perception testing indicated	Yes No
Method:	
Colour SAFE	Colour UNSAFE

Visual acuity

(314) Distant vision at 5m/6m		Spectacles	Contact lenses
Uncorrected			
Right eye	Corrected to		
Left eye	Corrected to		
Both eyes	Corrected to		
(315) Intermediate vision at 1m		Spectacles	Contact lenses
Uncorrected			
Right eye	Corrected to		
Left eye	Corrected to		
Both eyes	Corrected to		
(316) Near vision at 30-50cm		Spectacles	Contact lenses
Uncorrected			
Right eye	Corrected to		
Left eye	Corrected to		
Both eyes	Corrected to		

(317) Refraction	Sph	Cylinder	Axis	Near (add)
Right eye				
Left eye				
Actual refraction examined Spectacles prescription based				

(318) Spectacles	(319) Contact lenses
Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Type:	Type:

(320) Intra-ocular pressure	
Right (mmHg)	Left (mmHg)
Method Normal <input type="checkbox"/> Abnormal <input type="checkbox"/>	

(321) Ophthalmological remarks and recommendation:

(322) Examiner's declaration:

I hereby certify that I/my AME group have personally examined the applicant named on this medical examination report and that this report with any attachment embodies my findings completely and correctly.		
(323) Place and date:	Ophth examiner's name and address: (block capitals)	AME or specialist stamp with No.:
AME signature:	E-mail: Telephone No.: Telefax No.:	

INSTRUCTIONS FOR COMPLETION OF THE OPHTHALMOLOGY EXAMINATION REPORT FORM

Writing should be legible and in block capitals using a ball-point pen. Completion of this form by typing or printing is also acceptable. If more space is required to answer any question, a plain sheet of paper should be used, bearing the applicant's name, the name and signature of the AME or ophthalmology specialist performing the examination and the date of signing. The following numbered instructions apply to the numbered headings on the ophthalmology examination report form.

Failure to complete the medical examination report form in full, as required, or to write legibly may result in non-acceptance of the application in total and may lead to withdrawal of any medical certificate issued. The making of false or misleading statements or the withholding of relevant information by an examiner may result in criminal prosecution, denial of an application or withdrawal of any medical certificate granted.

The AME or ophthalmology specialist performing the examination should verify the identity of the applicant. The applicant should then be requested to complete the sections 1, 2, 3, 4, 5, 6, 7, 12 and 13 on the form and then sign and date the consent to release of medical information (section 301) with the examiner countersigning as witness.

302 EXAMINATION CATEGORY – Tick appropriate box.

Initial – Initial examination for either class 1 or 2; also initial examination for upgrading from class 2 to 1 (notate 'upgrading' in section 303).

Renewal/Revalidation – Subsequent comprehensive ophthalmological examinations (due to refractive error).

Special referral – NON-ROUTINE examination for assessment of an ophthalmological symptom or finding.

303 OPHTHALMOLOGICAL HISTORY – Detail here any history of note or reasons for special referral.

304 to 309 inclusive: **CLINICAL EXAMINATION** – These sections together cover the general clinical examination and each of the sections should be marked (with a tick) as normal or abnormal. Any abnormal findings or comments on findings should be entered in section 321.

310 **CONVERGENCE** – Enter near point of convergence in cm, as measured using RAF near point rule or equivalent. Tick whether normal or abnormal. Any abnormal findings or comments on findings should be entered in section 321.

311 **ACCOMMODATION** – Enter measurement recorded in dioptres using RAF near point rule or equivalent. Tick whether normal or abnormal. Any abnormal findings or comments on findings should be entered in section 321.

312 **OCULAR MUSCLE BALANCE** – Ocular muscle balance is tested at distant 5 or 6 m and near at 30-50 cm and results recorded. Presence of tropia or phoria must be entered accordingly and also whether fusional reserve testing was NOT performed and if performed whether normal or not.

313 **COLOUR PERCEPTION** – Enter type of pseudo-isochromatic plates (ishihara) as well as number of plates presented with number of errors made by examinee. State whether advanced colour perception testing is indicated and what methods used (which colour lantern or anomaloscopy) and finally whether judged to be colour safe or unsafe. Advanced colour perception testing is usually only required for initial assessment, unless indicated by change in applicant's colour perception.

314–316 **VISUAL ACUITY TESTING AT 5 m/6 m, 1 m and 30-50 cm** – Record actual visual acuity obtained in appropriate boxes. If correction not worn nor required, put line through corrected vision boxes. Distant visual acuity to be tested at either 5 m or 6 m with the appropriate chart for that distance.

317 **REFRACTION** – Record results of refraction. Indicate also whether for class 2 applicants, refraction details are based upon spectacle prescription.

318 **SPECTACLES** – Tick appropriate box signifying if spectacles are or are not worn by applicant. If used, state whether unifocal, bifocal, varifocal or look-over.

319 **CONTACT LENSES** – Tick appropriate box signifying if contact lenses are or are not worn. If worn, state type from the following list; hard, soft, gas-permeable, disposable.

320 **INTRA-OCULAR PRESSURE** – Enter intra-ocular pressure recorded for right and left eyes and indicate whether normal or not. Also indicate method used – applanation, air etc.

321 **OPHTHALMOLOGICAL REMARKS AND RECOMMENDATION** – Enter here all remarks, abnormal findings and assessment results. Also enter any limitations recommended. If there is any doubt about findings or recommendations, the examiner may contact the AMS for advice before finalising the report form.

322 **OPHTHALMOLOGY EXAMINER'S DETAILS** – The ophthalmology examiner must sign the declaration, complete his/her name and address in block capitals, contact details and lastly stamp the report with his/her designated stamp incorporating his/her AME or specialist number.

323 **PLACE AND DATE** – Enter the place (town or city) and the date of examination. The date of examination is the date of the clinical examination and not the date of finalisation of form. If the ophthalmology examination report is finalised on a different date, enter date of finalisation on section 321 as 'Report finalised on':

OTORHINOLARYNGOLOGY EXAMINATION REPORT FORM

Complete this page fully and in block capitals – Refer to instructions for completion.

MEDICAL IN CONFIDENCE

Applicant's details

(1) State applied to:	(2) Medical certificate applied for:	class 1 <input type="checkbox"/>	class 2 <input type="checkbox"/>
(3) Surname:	(4) Previous surname(s):	(12) Application:	Initial <input type="checkbox"/> Revalidation/Renewal <input type="checkbox"/>
(5) Forename(s):	(6) Date of birth:	(7) Sex:	(13) Reference number:
		Male <input type="checkbox"/> Female <input type="checkbox"/>	
(401) Consent to release of medical information: I hereby authorise the release of all information contained in this report and any or all attachments to the AME and, where necessary, to the medical assessor of the licensing authority, recognising that these documents, or any electronically stored data, are to be used for completion of a medical assessment and will become and remain the property of the licensing authority, providing that I or my physician may have access to them according to national law. Medical confidentiality will be respected at all times.			
..... Date Signature of applicant Signature of AME	

(402) Examination category:	(403) Otorhinolaryngological history:
Initial <input type="checkbox"/>	
Special referral <input type="checkbox"/>	

Clinical examination

Check each item	Normal	Abnormal
(404) Head, face, neck, scalp		
(405) Buccal cavity, teeth		
(406) Pharynx		
(407) Nasal passages and naso-pharynx (incl. anterior rhinoscopy)		
(408) Vestibular system incl. Romberg test		
(409) Speech		
(410) Sinuses		
(411) Ext acoustic meati, tympanic membranes		
(412) Pneumatic otoscopy		
(413) Impedance tympanometry including Valsalva manoeuvre (initial only)		

(419) Pure tone audiometry

Hz	dB HL (hearing level)	
	Right ear	Left ear
250		
500		
1000		
2000		
3000		
4000		
6000		
8000		

(420) Audiogram

dB/HL	o = Right		--- = Air	 = Bone			
	x = Left							
-10								
0								
10								
20								
30								
40								
50								
60								
70								
80								
90								
100								
110								
120								
Hz	250	500	1000	2000	3000	4000	6000	8000

Additional testing (if indicated)	Not performed	Normal	Abnormal
(414) Speech audiometry			
(415) Posterior rhinoscopy			
(416) EOG; spontaneous and positional nystagnus			
(417) Differential caloric test or vestibular autorotation test			
(418) Mirror or fibre laryngoscopy			

(421) Otorhinolaryngology remarks and recommendation:

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(422) Examiner's declaration:

I hereby certify that I/my AME group have personally examined the applicant named on this medical examination report and that this report with any attachment embodies my findings completely and correctly.		
(423) Place and date:	ORL examiner's name and address: (block capitals)	AME or specialist stamp with No:
AME signature:	E-mail:	

Telephone No.:

Telefax No.:

INSTRUCTIONS FOR COMPLETION OF THE OTORHINOLARYNGOLOGY EXAMINATION REPORT FORM

Writing should be legible and in block capitals using a ball-point pen. Completion of this form by typing or printing is also acceptable. If more space is required to answer any question, a plain sheet of paper should be used, bearing the applicant's name, the name and signature of the AME or otorhinolaryngology specialist performing the examination and the date of signing. The following numbered instructions apply to the numbered headings on the otorhinolaryngology examination report form.

Failure to complete the medical examination report form in full, as required, or to write legibly may result in non-acceptance of the application in total and may lead to withdrawal of any medical certificate issued. The making of false or misleading statements or the withholding of relevant information by an examiner may result in criminal prosecution, denial of an application or withdrawal of any medical certificate granted.

The AME or otorhinolaryngology specialist performing the examination should verify the identity of the applicant. The applicant should then be requested to complete the sections 1, 2, 3, 4, 5, 6, 7, 12 and 13 on the form and then sign and date the consent to release of medical information (section 401) with the examiner countersigning as witness.

402 EXAMINATION CATEGORY – Tick appropriate box.

Initial – Initial examination for class 1; also initial examination for upgrading from class 2 to 1 (notate upgrading' in section 403)

Special Referral – NON-ROUTINE examination for assessment of an ORL symptom or finding

403 OTORHINOLARYNGOLOGICAL HISTORY – Detail here any history of note or reasons for special referral.

404-413 inclusive: CLINICAL EXAMINATION – These sections together cover the general clinical examination and each of the sections should be marked (with a tick) as normal or abnormal. Any abnormal findings or comments on findings should be entered in section 421.

414-418 inclusive: ADDITIONAL TESTING – These tests are only required to be performed if indicated by history or clinical findings and are not routinely required.

For each test one of the boxes must be completed – if the test is not performed then tick that box – if the test has been performed then tick the appropriate box for a normal or abnormal result. All remarks and abnormal findings should be entered in section 421.

419 PURE TONE AUDIOMETRY – Complete figures for dB HL (hearing level) in each ear at all listed frequencies.

420 AUDIOGRAM – Complete audiogram from figures as listed in section 419.

421 OTORHINOLARYNGOLOGY REMARKS AND RECOMMENDATION – Enter here all remarks, abnormal findings and assessment results. Also enter any limitations recommended. If there is any doubt about findings or recommendations the examiner may contact the AMS for advice before finalising the report form.

422 OTORHINOLARYNGOLOGY EXAMINER'S DETAILS – The otorhinolaryngology examiner must sign the declaration, complete his/her name and address in block capitals, contact details and lastly stamp the report with his/her designated stamp incorporating his/her AME or specialist number.

423 PLACE AND DATE – Enter the place (town or city) and the date of examination. The date of examination is the date of the clinical examination and not the date of finalisation of form. If the ORL examination report is finalised on a different date, enter date of finalisation in section 421 as 'Report finalised

ARA.MED.145 GMP notification to the competent authority

The competent authority, when applicable, shall establish a notification process for general medical practitioners (GMPs) to ensure that the GMP is aware of the medical requirements laid down in MED.B.095.

ARA.MED.150 Record-keeping

(a) In addition to the records required in ARA.GEN.220, the competent authority shall include in its system of record-keeping details of aero-medical examinations and assessments submitted by AMEs, AeMCs or GMPs.

(b) All aero-medical records of licence holders shall be kept for a minimum period of 10 years after the expiry of their last medical certificate.

(c) For the purpose of aero-medical assessments and standardisation, aero-medical records shall be made available after written consent of the applicant/licence holder to:

- (1) an AeMC, AME or GMP for the purpose of completion of an aero-medical assessment;
- (2) a medical review board that may be established by the competent authority for secondary review of borderline cases;
- (3) relevant medical specialists for the purpose of completion of an aero-medical assessment;

- (4) the medical assessor of the competent authority of another Member State for the purpose of cooperative oversight;
 - (5) the applicant/licence holder concerned upon their written request; and
 - (6) after disidentification of the applicant/licence holder to the Agency for standardisation purposes.
- (d) The competent authority may make aero-medical records available for other purposes than those mentioned in (c) in accordance with Directive 95/46/EC as implemented under national law.
- (e) The competent authority shall maintain lists:
- (1) of all AMEs that hold a valid certificate issued by that authority; and
 - (2) where applicable, of all GMPs acting as AMEs on their territory.
- These lists shall be disclosed to other Member States and the Agency upon request.

AMC1 ARA.MED.150 Record-keeping

RELEASE OF AERO-MEDICAL RECORDS

In accordance with Directive 95/46/EC as implemented under national law, aeromedical records may also be released:

- (a) upon written request of the applicant, to management of the competent authority, for review in response to a complaint;
- (b) to research institutes for the purpose of scientific research, with assurance of de-identification prior to publication;
- (c) to any investigation body (accident, security, police), when required under national law; and
- (d) for any other circumstances, as required under national law.

SECTION II - Aero-medical examiners (AMEs)

ARA.MED.200 Procedure for the issue, revalidation, renewal or change of an AME certificate

- (a) The certification procedure for an AME shall follow the provisions laid down in ARA.GEN.315. Before issuing the certificate, the competent authority shall have evidence that the AME practice is fully equipped to perform aero-medical examinations within the scope of the AME certificate applied for.
- (b) When satisfied that the AME is in compliance with the applicable requirements, the competent authority shall issue, revalidate, renew or change the AME certificate for a period not exceeding 3 years, using the form established in appendix VII to this Part.

AMC1 ARA.MED.200 Procedure for the issue, revalidation, renewal or change of an AME certificate

INSPECTION OF THE AME PRACTICE

Before issuing the AME certificate, the competent authority should conduct an inspection of the AME practice to verify compliance with ARA.MED.200 (a).

ARA.MED.240 General medical practitioners (GMPs) acting as AMEs

The competent authority of a Member State shall notify the Agency and competent authorities of other Member States if aero-medical examinations for the LAPL can be carried out on its territory by GMPs.

ARA.MED.245 Continuing oversight of AMEs and GMPs

When developing the continuing oversight programme referred to in ARA.GEN.305, the competent authority shall take into account the number of AMEs and GMPs exercising their privileges within the territory where the competent authority exercises oversight.

ARA.MED.250 Limitation, suspension or revocation of an AME certificate

- (a) The competent authority shall limit, suspend or revoke an AME certificate in cases where:
- (1) the AME no longer complies with applicable requirements;
 - (2) failure to meet the criteria for certification or continuing certification;
 - (3) deficiency of aero-medical record-keeping or submission of incorrect data or information;
 - (4) falsification of medical records, certificates or documentation;
 - (5) concealment of facts appertaining to an application for, or holder of, a medical certificate or false or fraudulent statements or representations to the competent authority;
 - (6) failure to correct findings from audit of the AME practice; and
 - (7) at the request of the certified AME.
- (b) The certificate of an AME shall be automatically revoked in either of the following circumstances:
- (1) revocation of medical licence to practice; or
 - (2) removal from the Medical Register.

ARA.MED.255 Enforcement measures

If, during oversight or by any other means, evidence is found showing a non-compliance of an AeMC, an AME or a GMP, the licensing authority shall have a process to review the medical certificates issued by that AeMC, AME or GMP and may render them invalid where required to ensure flight safety.

SECTION III - Medical certification

ARA.MED.315 Review of examination reports

The licensing authority shall have a process in place to:

- (a) review examination and assessment reports received from the AeMCs, AMEs and GMPs and inform them of any inconsistencies, mistakes or errors made in the assessment process; and
- (b) assist AMEs and AeMCs on their request regarding their decision on aero-medical fitness in contentious cases.

AMC1 ARA.MED.315(a) Review of examination reports

GENERAL

- (a) The process to review examination and assessment reports received from AeMCs, AMEs and GMPs should aim to check all reports received.
- (b) The licensing authority should take account of the proportion of inconsistencies or errors found in the assessment process and adapt the sample size accordingly and to review all reports if necessary.

ARA.MED.325 Secondary review procedure

The competent authority shall establish a procedure for the review of borderline and contentious cases with independent medical advisors, experienced in the practice of aviation medicine, to consider and advise on an applicant's fitness for medical certification.

ARA.MED.330 Special medical circumstances

- (a) When new medical technology, medication or procedures are identified that may justify a fit assessment of applicants otherwise not in compliance with the requirements, research may be carried out to gather evidence on the safe exercise of the privileges of the licence.
- (b) In order to undertake research, a competent authority, in cooperation with at least one other competent authority, may develop and evaluate a medical assessment protocol based on which these competent authorities may issue a defined number of pilot medical certificates with appropriate limitations.
- (c) AeMCs and AMEs may only issue medical certificates on the basis of a research protocol if instructed to do so by the competent authority.
- (d) The protocol shall be agreed between the competent authorities concerned and shall include as a minimum:
 - (1) a risk assessment;
 - (2) a literature review and evaluation to provide evidence that issuing a medical certificate based on the research protocol would not jeopardise the safe exercise of the privileges of the licence;
 - (3) detailed selection criteria for pilots to be admitted to the protocol;
 - (4) the limitations that will be endorsed on the medical certificate;
 - (5) the monitoring procedures to be implemented by the competent authorities concerned;
 - (6) the determination of end points for terminating the protocol.
- (e) The protocol shall be compliant with relevant ethical principles.
- (f) The exercise of licence privileges by licence holders with a medical certificate issued on the basis of the protocol shall be restricted to flights in aircraft registered in the Member States involved in the research protocol. This restriction shall be indicated on the medical certificate.
- (g) The participating competent authorities shall:
 - (1) provide the Agency with:
 - (i) the research protocol before implementation;

- (ii) the details and qualifications of the nominated focal point of each participating competent authority;
 - (iii) documented reports of regular evaluations of its effectiveness;
- (2) provide the AeMCs and AMEs within their jurisdiction with details of the protocol before implementation for their information.

AMC1 ARA.MED.330 Special medical circumstances

GENERAL

The protocol should:

- (a) assess the incapacitation risk;
- (b) assess the risk of subtle impairment of performance;
- (c) undertake a risk–benefit analysis;
- (d) include a review of the regulations in use in other major aviation States and ICAO;
- (e) determine which class of medical certificate is included in the scope;
- (f) estimate the number of pilots likely to be included;
- (g) list all anticipated risks to the protocol and provide a risk management strategy including appropriate limitations for every anticipated risk; where the risk of subtle impairment of performance is identified, the protocol should include requirements for minimum simulator testing or minimum lineflying under supervision or both;
- (h) nominate medical research experts, if necessary, to provide advice on research methods.

AMC1 ARA.MED.330(b)(c) Special medical circumstances

GENERAL

Initial medical certificates issued on the basis of a protocol should only be issued by the competent authority. Thereafter, the competent authority should decide whether the AeMC or AME may issue the medical certificate

GM1 ARA.MED.330 Special medical circumstances

GENERAL

- (a) When the terms ‘medical assessment protocol’, ‘research protocol’ and ‘protocol’ (as mentioned in ARA.MED.330 and its associated AMC) are used, they all refer to a ‘medical assessment protocol’.
- (b) The protocol is to enable experience to be gained in special medical circumstances in a controlled manner. This is to facilitate a better understanding of the treatment or condition, so that an evidence-based decision concerning its implementation may be considered.
- (c) The protocol and its implementation should comply with the principles described in the following publication of the World Medical Association (WMA):
“WMA Declaration of Helsinki - Ethical Principles for Medical Research Involving Human Subjects”, as last amended

SUBPART ATO - SPECIFIC REQUIREMENTS RELATED TO APPROVED TRAINING ORGANISATIONS (ATOs)

SECTION I – General

ARA.ATO.105 Oversight Programme

The oversight programme for ATOs shall include the monitoring of course standards, including the sampling of training flights with students, if appropriate to the aircraft used.

AMC1 ARA.ATO.105 Oversight programme

GENERAL

(a) The audit or inspection of an ATO should be conducted on the basis of checking the facility for compliance, interviewing personnel and sampling any relevant training course for its conduct and standard.

(b) In addition to the items required in AMC1 ARA.GEN.310(a), such an audit or inspection should focus on:

- (1) information on flight instructors, validity of licences, certificates, ratings and log books;
- (2) evidence of sufficient funding;
- (3) training aircraft in use, including their registration, associated documents and maintenance records;
- (4) aerodromes, operating sites and associated facilities;
- (5) facilities with regard to their adequacy to the courses being conducted and number of students;
- (6) FSTDs, including their qualification certificates, associated documents and maintenance records;
- (7) documentation, in particular documents related to courses, information on the updating system, and training and operations manual(s);
- (8) training records and checking forms; and
- (9) flight instruction, including pre-briefing, actual flight and debriefing.

ARA.ATO.120 Record-keeping

In addition to the records required in ARA.GEN.220, the competent authority shall include in its system of recordkeeping details of courses provided by the ATO, and if applicable, records relating to FSTDs used for training.

AMC1 ARA.ATO.120 Record-keeping

FSTDs

Records relating to FSTDs should include, as a minimum:

- (a) the application for an FSTD qualification;
- (b) the FSTD qualification certificate including any changes;
- (c) a copy of the evaluation programme listing the dates when evaluations are due and when evaluations were carried out;
- (d) initial and recurrent evaluation records;
- (e) copies of all relevant correspondence;
- (f) details of any exemption and enforcement actions; and
- (g) any report from other competent authorities relating to initial and recurrent evaluations.

SUBPART FSTD - SPECIFIC REQUIREMENTS RELATED TO THE QUALIFICATION OF FLIGHT SIMULATION TRAINING DEVICES (FSTDs)

SECTION I – General

ARA.FSTD.100 Initial evaluation procedure

- (a) Upon receiving an application for an FSTD qualification certificate, the competent authority shall:
- (1) evaluate the FSTD submitted for initial evaluation or for upgrading against the applicable qualification basis;
 - (2) assess the FSTD in those areas that are essential to completing the flight crew member training, testing and checking process, as applicable;
 - (3) conduct objective, subjective and functions tests in accordance with the qualification basis and review the results of such tests to establish the qualification test guide (QTG); and
 - (4) verify if the organisation operating the FSTD is in compliance with the applicable requirements. This does not apply to the initial evaluation of basic instrument training devices (BITDs).
- (b) The competent authority shall only approve the QTG after completion of the initial evaluation of the FSTD and when all discrepancies in the QTG have been addressed to the satisfaction of the competent authority. The QTG resulting from the initial evaluation procedure shall be the master QTG (MQTG), which shall be the basis for the FSTD qualification and subsequent recurrent FSTD evaluations.
- (c) Qualification basis and special conditions.
- (1) The competent authority may prescribe special conditions for the FSTD qualification basis when the requirements of ORA.FSTD.210(a) are met and when it is demonstrated that the special conditions ensure an equivalent level of safety to that established in the applicable certification specification.
 - (2) When the competent authority, if other than the Agency, has established special conditions for the qualification basis of an FSTD, it shall without undue delay notify the Agency thereof. The notification shall be accompanied by a full description of the special conditions prescribed, and a safety assessment demonstrating that an equivalent level of safety to that established in the applicable Certification Specification is met.

AMC1 ARA.FSTD.100(a)(1) Initial evaluation procedure

ASSESSMENT PROCESS LEADING TO THE ISSUE OF AN FSTD QUALIFICATION

- (a) FSTDs require evaluation leading to qualification. The required process should be accomplished in two distinct steps. First, a check should be made to determine whether or not the FSTD complies with the applicable requirements. When making this check, the competent authority should ensure that accountability for the issue of an FSTD qualification is clearly defined. In all cases an individual department manager of the competent authority should be appointed under whose personal responsibility the issue of an FSTD qualification is to be considered. The second step should be the grant (or refusal) of an FSTD qualification.
- (b) When checking compliance with the applicable requirements, the competent authority should ensure that the following steps are taken:
- (1) Once an FSTD is contracted to be built, the organisation that is to operate the FSTD should ensure that the regulatory standard upon which the FSTD will eventually be qualified against is acceptable to the competent authority. This should be the current applicable version of CS-FSTD(A) or CS-FSTD(H) at the time of application.

- (2) A written application for an FSTD qualification should be submitted, in a format according to ORA.FSTD.200, at least 3 months before the date of intended operation. However, the qualification test guide (QTG) may be submitted later, but not less than 30 days before the date of intended evaluation. The application form should be printed in English and any other language(s) of the competent authority's choosing.
- (3) An individual should be nominated by the department manager of the competent authority to oversee, and become the focal point for, all aspects of the FSTD qualification process, and to coordinate all necessary activity. The nominated person should be responsible to the department manager for confirming that all appropriate evaluations/inspections are made.
- (4) The ability of the applicant to secure, in compliance with the applicable requirements and certification specifications, the safe and reliable operation and proper maintenance of the FSTD should be assessed.
- (5) The applicant's proposed compliance monitoring system should be scrutinised with particular regard to the allocated resources. Care should be taken to verify that the system is comprehensive and likely to be effective.
- (6) The competent authority should inform the applicant of its final decision concerning the qualification within 14 days of completion of the evaluation process irrespective of any temporary qualification issued.
- (7) On completion of the evaluation process, the application, together with a written recommendation and evidence of the result of all evaluations or assessments, should be presented to the nominated person responsible for FSTD qualification. The presentation should be made by the person with overall responsibility, nominated in accordance with (b)(3).
- (8) The department manager of the competent authority should only issue an FSTD qualification certificate if he/she is completely satisfied that all requirements have been met. If he/she is not satisfied, the applicant should be informed in writing of the improvements that are required in order to satisfy the competent authority.
- (9) If an application for an FSTD qualification is refused, the applicant should be informed of such rights of appeal as exist under national regulations.

AMC2 ARA.FSTD.100(a)(1) Initial evaluation procedure

GENERAL

- (a) During initial and recurrent FSTD evaluations it should be necessary for the competent authority to conduct an appropriate sample of the objective and subjective tests described in Part-ORA and detailed in CS-FSTD(A) and CS-FSTD(H), as applicable. There may be occasions when all tests cannot be completed – for example during recurrent evaluations on a convertible FSTD – but arrangements should be made for all tests to be completed within a reasonable time.
- (b) Following an evaluation, it is possible that a number of defects are identified. Generally, these defects should be rectified and the competent authority notified of such action within 30 days. Serious defects, which affect flight crew training, testing and checking, could result in an immediate downgrading of the qualification level I. If any defect remains unattended without good reason for a period greater than 30 days, subsequent downgrading may occur or the FSTD qualification could be revoked.
- (c) For the evaluation of an FSTD the standard form as mentioned in AMC5 ARA.FSTD.100(a)(1) should be used.

AMC3 ARA.FSTD.100(a)(1) Initial evaluation procedure

INITIAL EVALUATION

- (a) The main focus of objective testing is the QTG. Well in advance of the evaluation date, the aircraft manufacturer and the competent authority should agree on the content and acceptability

of the validation tests contained in the QTG data package. This will ensure that the content of the QTG is acceptable to the competent authority and avoid time being wasted during the initial qualification. The acceptability of all tests depends upon their content, accuracy, completeness and recency of the results.

(b) Much of the time allocated to objective tests depends upon the speed of the automatic and manual systems set up to run each test and whether or not special equipment is required.

The competent authority should not necessarily warn the organisation operating an FSTD of the sample validation tests which should be run on the day of the evaluation, unless special equipment is required.

(c) The FSTD cannot be used for subjective tests while part of the QTG is being run. Therefore, sufficient time (at least 8 consecutive hours) should be set aside for the examination and running of the QTG.

(d) The subjective tests for the evaluation can be found in CS-FSTD(A) or CS-FSTD(H), and a suggested subjective test profile is described in AMC1 ARA.FSTD.100(a)(3). Essentially, 1 working day should be required for the subjective test routine, which effectively denies use of the FSTD for any other purpose.

(e) To ensure adequate coverage of subjective and objective tests and to allow for cost effective rectification and re-test before departure of the inspection team, adequate time (up to 3 consecutive days) should be dedicated to an initial evaluation of an FSTD.

AMC4 ARA.FSTD.100(a)(1) Initial evaluation procedure

COMPOSITION OF THE EVALUATION TEAM

(a) The competent authority should appoint a technical team to evaluate an FSTD in accordance with a structured routine to gain a qualification level. The team should normally consist of at least the following personnel:

(1) A technical FSTD inspector of the competent authority, or an accredited inspector from another competent authority, qualified in all aspects of flight simulation hardware, software and computer modelling or, exceptionally, a person designated by the competent authority with equivalent qualifications; and

(2) One of the following:

(i) a flight inspector of the competent authority, or an accredited inspector from another competent authority, who is qualified in flight crew training procedures and holds a valid type rating on the aeroplane/helicopter (or for flight navigation procedures trainer (FNPT) and basic instrument training device (BITD), class rated on the class of aeroplane/type of helicopter) being simulated; or

(ii) a flight inspector of the competent authority who is qualified in flight crew training procedures, assisted by a type rating instructor holding a valid type rating on the aeroplane/helicopter (or for FNPT and BITD, class rated on the class of aeroplane/type of helicopter) being simulated; or, exceptionally,

(iii) a person designated by the competent authority who is qualified in flight crew training procedures and holds a valid type rating on the aeroplane/helicopter (or for FNPT and BITD, class rated on the class of aeroplane/type of helicopter) being simulated and sufficiently experienced to assist the technical team. This person should fly out at least part of the functions and subjective test profiles.

(3) Where a designee is used as a substitute for one of the competent authority's inspectors, the other person shall be a properly qualified inspector of the competent authority or an accredited inspector from another Member State's competent authority.

(b) For a flight training device (FTD) level 1 and FNPT Type I, one suitably qualified inspector may combine the functions in (a)(1) and (a)(2).

(c) For a BITD this team should consist of an inspector from a competent authority and one from another competent authority, including the manufacturer's competent authority, if applicable.

- (d) Additionally, the following persons should be present:
- (1) for a full flight simulator (FFS), FTD and FNPT a type or class rated instructor from the ATO operating an FSTD or from the main FSTD user;
 - (2) for all types, sufficient FSTD support staff to assist with the running of tests and operation of the instructor's station.

AMC5 ARA.FSTD.100(a)(1) Initial evaluation procedure

FSTD EVALUATION REPORT FOR INITIAL AND RECURRENT EVALUATION

FSTD Evaluation Report

Date:.....

[competent authority]

FSTD EVALUATION REPORT

[Member State] FSTD code (if applicable):

EASA FSTD code (if applicable):

Aircraft type and variant:

Class of aeroplane / type of helicopter:

Engine fit(s) simulated:

Contents

1. Flight simulation training device (FSTD) characteristics
2. Evaluation details
3. Supplementary information
4. Training, testing and checking considerations
5. Classification of items
6. Results
7. Evaluation team

The conclusions presented are those of the evaluation team. The competent authority reserves the right to change these after internal review.

1. Flight simulation training device (FSTD)	
(a) Organisation operating the FSTD:	
(b) FSTD Location:	
(c) FSTD Identification (Member State FSTD code / EASA FSTD Code):	
(d) FSTD Manufacturer and FSTD Identification serial number:	
(e) First entry into service (month/year):	
(f) Visual system (manufacturer and type):	
(g) Motion system (manufacturer and type) :	
(h) Aircraft type and variant:	
(i) Engine fit(s):	
(k) Engine instrumentation:	
Flight instrumentation:	
2. Evaluation details	
(a) Date of evaluation:	(b) Date of previous evaluation:

(c) Type of evaluation: <input type="checkbox"/> initial <input type="checkbox"/> recurrent <input type="checkbox"/> special	
(d) FSTD Qualification Level recommended:	
FFS	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> AG <input type="checkbox"/> BG <input type="checkbox"/> CG <input type="checkbox"/> DG <input type="checkbox"/> SC
FTD	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
FNPT	<input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> MCC
BITD	<input type="checkbox"/>
Technical criteria primary reference document:	
Validation data roadmap (VDR) ID-No.:	
3. Supplementary information	
Company representative(s) (FSTD operator, Main FSTD user)	
FSTD seats available	
Visual databases used during evaluation	
Other	
4. Training, testing and checking considerations	
CAT I RVR m DH ft	
CAT II RVR m DH ft	
CAT III RVR m DH ft (lowest minimum)	
LVTO RVR m	
Recency	
IFR-training/check	
Type rating	
Proficiency checks	
Autocoupled approach	
Autoland/Roll out guidance	
ACAS I / II	
Windshear warning system/predictive windshear	
WX-Radar	
HUD/HUGS	
FANS	
GPWS/EGPWS	
ETOPS capability	
RNP APCH LNAV	
RNP APCH LNAV/VNAV	
RNP APCH LPV	
RNP AR APCH	

Other	
-------	--

5. Classification of items

UNACCEPTABLE

An item that fails to comply with the required standard and, therefore, affects the level of qualification or the qualification itself. If these items will not be corrected or clarified within a given time limit, the (competent authority) should have to vary, limit, suspend or revoke the FSTD qualification.

RESERVATION

An item where compliance with the required standard is not clearly proven and the issue will be reserved for a later decision. Resolution of these items will require either:

1. a *competent authority* policy ruling; or
2. additional substantiation.

UNSERVICEABILITY

A device that is temporarily inoperative or performing below its nominal level.

LIMITATION

An item that prevents the full usage of the FSTD according to the training, testing and checking considerations due to the unusable devices, systems or parts thereof.

RECOMMENDATION FOR IMPROVEMENT

An item that meets the required standard, but where considerable improvement is strongly recommended.

COMMENT

Self-explanatory

Period of Rectification

As set out in AMC2 ARA.FSTD.100(a)(1) point (b):

Following an evaluation, it is possible that a number of defects are identified. Generally, these defects should be rectified and the competent authority notified of such action within 30 days. Serious defects, which affect flight crew training, testing and checking, could result in an immediate downgrading of the qualification level, or if any defect remains unattended without good reason for a period greater than 30 days, subsequent downgrading may occur or the FSTD qualification could be revoked.

6. Results

6.1 Subjective/Functional

A Unacceptable

1	
---	--

B Reservation

1	
---	--

C Unserviceability

1	
---	--

D Restriction

1	
---	--

E Recommendation for improvement

1	
---	--

F Comment

1	
---	--

6.2 Objective

A Unacceptable

1	
---	--

B Reservation

1	
---	--

E Recommendation for improvement

1	
---	--

F Comment

1	
---	--

7. Evaluation Team

Name	Position	Organisation	Signature
	Technical Inspector or person designated by the competent authority		
	Flight Inspector or person designated by the competent authority		
		[FSTD User]	
		[Organisation operating the FSTD]	

Signed:For the competent authority

GM1 ARA.FSTD.100(a)(1) Initial evaluation procedure

INITIAL EVALUATION

A useful explanation of how the validation tests should be run is contained in the 'RAeS Aeroplane Flight Simulator Evaluation Handbook' (February 1995 or as amended) produced in support of the ICAO Doc 9625, 'Manual of Criteria for the Qualification of Flight Simulators'.

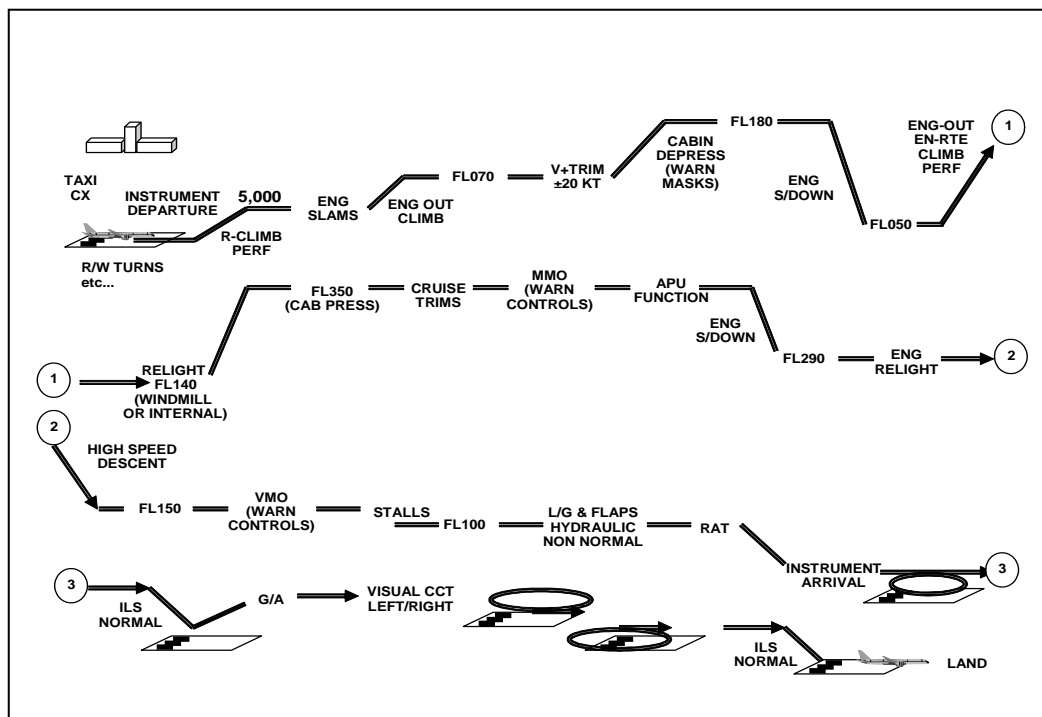
[Go back to Subpart FSTD](#)[Go back to the content](#)**AMC1 ARA.FSTD.100(a)(3) Initial evaluation procedure****FUNCTIONS AND SUBJECTIVE TESTS – SUGGESTED TEST ROUTINE**

(a) During initial and recurrent evaluations of an FSTD, the competent authority should conduct a series of functions and subjective tests that together with the objective tests complete the comparison of the FSTD with the aircraft, the class of aeroplane or type of helicopter.

(b) Functions tests verify the acceptability of the simulated aircraft systems and their integration. Subjective tests verify the fitness of the FSTD in relation to training, checking and testing tasks.

(c) The FSTD should provide adequate flexibility to permit the accomplishment of the desired and required tasks while maintaining an adequate perception by the flight crew that they are operating in a real aircraft environment. Additionally, the instructor operating station (IOS) should not present an unnecessary distraction from observing the activities of the flight crew whilst providing adequate facilities for the tasks.

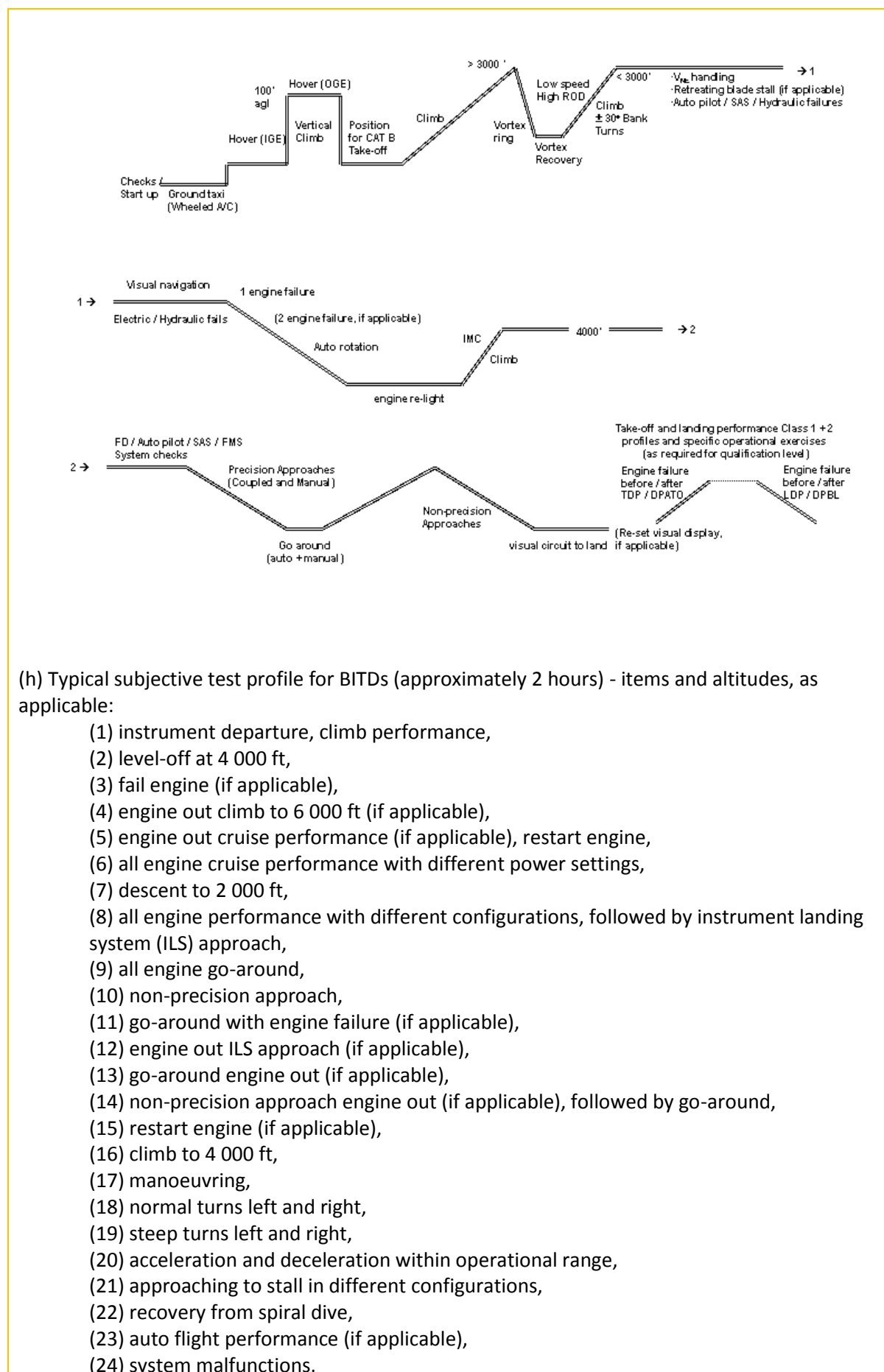
(d) It is important that both the competent authority and the organisation operating an FSTD understand what to expect from the routine of FSTD functions and subjective tests. Part of the subjective tests routine for an FSTD should involve an uninterrupted fly-out (except for FTD level 1) comparable with the duration of typical training sessions in addition to assessment of flight freeze and repositioning. An example of such a profile is to be found under points (f) and (g) (for BITD point (h)).



(e) The competent authorities, and organisations operating FSTD, who are unfamiliar with the evaluation process should contact the Agency or the competent authority of another Member State with adequate expertise in this field.

(f) Typical test profile for an FSTD aeroplane:

(g) Typical test profile for an FSTD helicopter:



(h) Typical subjective test profile for BITDs (approximately 2 hours) - items and altitudes, as applicable:

- (1) instrument departure, climb performance,
- (2) level-off at 4 000 ft,
- (3) fail engine (if applicable),
- (4) engine out climb to 6 000 ft (if applicable),
- (5) engine out cruise performance (if applicable), restart engine,
- (6) all engine cruise performance with different power settings,
- (7) descent to 2 000 ft,
- (8) all engine performance with different configurations, followed by instrument landing system (ILS) approach,
- (9) all engine go-around,
- (10) non-precision approach,
- (11) go-around with engine failure (if applicable),
- (12) engine out ILS approach (if applicable),
- (13) go-around engine out (if applicable),
- (14) non-precision approach engine out (if applicable), followed by go-around,
- (15) restart engine (if applicable),
- (16) climb to 4 000 ft,
- (17) manoeuvring,
- (18) normal turns left and right,
- (19) steep turns left and right,
- (20) acceleration and deceleration within operational range,
- (21) approaching to stall in different configurations,
- (22) recovery from spiral dive,
- (23) auto flight performance (if applicable),
- (24) system malfunctions,

(25) approach.

ARA.FSTD.110 Issue of an FSTD qualification certificate

(a) After completion of an evaluation of the FSTD and when satisfied that the FSTD meets the applicable qualification basis in accordance with ORA.FSTD.210 and that the organisation operating it meets the applicable requirements to maintain the qualification of the FSTD in accordance with ORA.FSTD.100, the competent authority shall issue the FSTD qualification certificate of unlimited duration, using the form as established in Appendix IV to this Part.

GM1 ARA.FSTD.100(a)(3) Initial evaluation procedure

GENERAL

A useful explanation of functions and subjective tests and an example of subjective test routine checklist may be found in the 'RAeS Airplane Flight Simulator Evaluation Handbook' Volume II (February 1995 or as amended) produced in support of ICAO Doc 9625, 'Manual of Criteria for the Qualification of Flight Simulators'.

AMC1 ARA.FSTD.110 Issue of an FSTD qualification certificate

BASIC INSTRUMENT TRAINING DEVICE (BITD)

- (a) The competent authority should only grant a BITD qualification for the BITD model to a BITD manufacturer following satisfactory completion of an evaluation.
- (b) This qualification should be valid for all serial numbers of this model without further technical evaluation.
- (c) The BITD model should be clearly identified by a BITD model number. A running serial number should follow the BITD model identification number.
- (d) The competent authority should establish and maintain a list of all BITD qualifications it has issued, containing the number of the BITD model with a reference to the hardware and software configuration.

ARA.FSTD.115 Interim FSTD qualification

- (a) In the case of the introduction of new aircraft programmes, when compliance with the requirements established in this Subpart for FSTD qualification is not possible, the competent authority may issue an interim FSTD qualification level.
- (b) For full flight simulators (FFS) an interim qualification level shall only be granted at level A, B or C.
- (c) This interim qualification level shall be valid until a final qualification level can be issued and, in any case, shall not exceed 3 years.

AMC1 ARA.FSTD.115 Interim FSTD qualification

NEW AIRCRAFT FFS / FTD QUALIFICATION – ADDITIONAL INFORMATION

- (a) Aircraft manufacturers' final data for performance, handling qualities, systems or avionics are seldom available until well after a new or derivative aircraft has entered service. Because it is often necessary to begin flight crew training and certification several months prior to the entry of the first aircraft into service, it may be necessary to use aircraft manufacturer-provided preliminary data for interim qualification of FSTDs. This is consistent with the possible interim approval of operational suitability data (OSD) relative to FFS in the type certification process under Part-21.
- (b) In recognition of the sequence of events that should occur and the time required for final data to become available, the competent authority may accept the use of certain partially validated preliminary aircraft and systems data, and early release ('red label') avionics in order to permit the necessary programme schedule for training, certification and service introduction.

(c) Organisations seeking qualification based on preliminary data should, however, consult the competent authority as soon as it is known that special arrangements will be necessary, or as soon as it is clear that preliminary data will need to be used for FSTD qualification.

Aircraft and FSTD manufacturers should also be made aware of the needs and agree on the data plan and FSTD qualification plan. There should be periodic meetings to keep the interested parties informed of the project's status.

(d) The precise procedure to be followed to gain competent authority acceptance to use preliminary data should vary from case to case and between aircraft manufacturers. Each aircraft manufacturer's new aircraft development and test programme is designed to suit the needs of the particular project and may not contain the same events or sequence of events as another manufacturer's programme or even the same manufacturer's programme for a different aircraft. Hence, there cannot be a prescribed invariable procedure for acceptance to use preliminary data. Instead there should be a statement describing the final sequence of events, data sources, and validation procedures agreed by the FSTD operator, the aircraft manufacturer, the FSTD manufacturer and the competent authority. The approval by the Agency of the definition of scope of the aircraft validation source data to support the objective qualification as part of the OSD can also be an interim approval in case of preliminary data. The preliminary data to be used should be based on this interim approval.

(e) There should be assurance that the preliminary data are the manufacturer's best representation of the aircraft and reasonable certainty that final data will not deviate to a large degree from these preliminary, but refined, estimates. First of all there should be an interim approval of OSD relative to flight simulators in the type certification process under Part-21. Furthermore, the data derived from these predictive or preliminary techniques should be validated by available sources including, at least, the following:

(1) *Manufacturer's engineering report.* Such reports explain the predictive method used and illustrate past successes of the method on similar projects. For example, the manufacturer could show the application of the method to an earlier aircraft model or predict the characteristics of an earlier model and compare the results to final data for that model.

(2) *Early flight tests results.* Such data will often be derived from aircraft certification tests, and should be used to maximum advantage for early FSTD validation. Certain critical tests, which would normally be done early in the aircraft certification programme, should be included to validate essential pilot training and certification manoeuvres. These include cases in which a pilot is expected to cope with an aircraft failure mode, including engine failures. The early data available will, however, depend on the aircraft manufacturer's flight test programme design and may not be the same in each case. However it is expected that the flight test programme of the aircraft manufacturer includes provisions for generation of very early flight tests results for FSTD validation.

(f) The use of preliminary data is not indefinite. The aircraft manufacturer's final data should be available within 6 months after the aircraft's first 'service entry' or as agreed by the competent authority, the organisation and the aircraft manufacturer, but usually not later than 1 year. When an organisation applies for an interim qualification using preliminary data, the organisation and the competent authority should agree upon the update programme. This should normally specify that the final data update will be installed in the FSTD within a period of 6 months following the final data release unless special conditions exist and a different schedule agreed. The FSTD performance and handling validation would then be based on data derived from flight tests. Initial aircraft systems data should be updated after engineering tests. Final aircraft systems data should also be used for FSTD programming and validation.

(g) FSTD avionics should stay essentially in step with aircraft avionics (hardware and software) updates. The permitted time lapse between aircraft and FSTD updates is not a fixed time but should be minimal. It may depend on the magnitude of the update and whether the QTG and pilot

training and certification are affected. Permitted differences in aircraft and FSTD avionics versions and the resulting effects on FSTD qualification should be agreed between the organisation and the competent authority. Consultation with the FSTD manufacturer is desirable throughout the agreement of the qualification process.

(h) The following describes an example of the design data and sources which might be used in the development of an interim qualification plan:

(1) The plan should consist of the development of a QTG based upon a mix of flight test and engineering simulation data. For data collected from specific aircraft flight tests or other flights, the required designed model and data changes necessary to support an acceptable proof of match (POM) should be generated by the aircraft manufacturer.

(2) In order that the two sets of data are properly validated, the aircraft manufacturer should compare their simulation model responses against the flight test data, when driven by the same control inputs and subjected to the same atmospheric conditions as were recorded in the flight test. The model responses should result from a simulation where the following systems are run in an integrated fashion and are consistent with the design data released to the FSTD manufacturer:

- (i) propulsion,
- (ii) aerodynamics,
- (iii) mass properties,
- (iv) flight controls,
- (v) stability augmentation,
- (vi) brakes and landing gear.

(i) For the qualification of FSTD of new aircraft types, it may be beneficial that the services of a suitably qualified test pilot are used for the purpose of assessing handling qualities and performance evaluation.

GM1 ARA.FSTD.115 Interim FSTD qualification

NEW AIRCRAFT FFS/FTD QUALIFICATION – ADDITIONAL INFORMATION

(a) A description of aircraft manufacturer-provided data needed for flight simulator modelling and validation is to be found in the IATA Document *Flight Simulator Design and Performance Data Requirements* (Edition 6 2000 or as amended).

(b) The proof of match should meet the relevant tolerances in AMC1 CS-FSTD(A).300 respectively AMC1 CS-FSTD(H).300.

ARA.FSTD.120 Continuation of an FSTD qualification

(a) The competent authority shall continuously monitor the organisation operating the FSTD to verify that:

- (1) the complete set of tests in the MQTG is rerun progressively over a 12-month period;
- (2) the results of recurrent evaluations continue to comply with the qualification standards and are dated and retained; and
- (3) a configuration control system is in place to ensure the continued integrity of the hardware and software of the qualified FSTD.

(b) The competent authority shall conduct recurrent evaluations of the FSTD in accordance with the procedures detailed in ARA.FSTD.100. These evaluations shall take place:

- (1) every year, in the case of a full flight simulator (FFS), flight training device (FTD) or flight and navigation procedures trainer (FNPT); the start for each recurrent 12-month period is the date of the initial qualification. The FSTD recurrent evaluation shall take place within the 60 days prior to the end of this 12-month recurrent evaluation period;
- (2) every 3 years, in the case of a BITD.

AMC1 ARA.FSTD.120 Continuation of an FSTD qualification**GENERAL**

- (a) *Objective Testing.* During recurrent evaluations, the competent authority should wish to see evidence of the successful running of the QTG between evaluations. The competent authority should select a number of tests to be run during the evaluation, including those that may be cause for concern. Again adequate notification would be given when special equipment is required for the test.
- (b) Essentially the time taken to run the objective tests depends upon the need for special equipment, if any, and the test system, and the FSTD cannot be used for subjective tests or other functions whilst testing is in progress.
- (c) For a modern FSTD incorporating an automatic test system, four hours would normally be required. FSTDs that rely upon manual testing may require a longer period of time.
- (d) *Subjective Testing.* Essentially the same subjective test routine should be flown as per the profile described in AMC1 ARA.FSTD.100(a)(3) with a selection of the subjective tests taken from CS-FSTD(A) or CS-FSTD(H), as appropriate.
- (e) Normally, the time taken for recurrent subjective testing is about 4 hours, and the FSTD should not perform other functions during this time.
- (f) To ensure adequate coverage of subjective and objective tests during a recurrent evaluation, a total of 8 hours should be allocated, (4 hours for a BITD). However, it should be remembered that any FSTD deficiency that arises during the evaluation could necessitate the extension of the evaluation period.

AMC2 ARA.FSTD.120 Continuation of an FSTD qualification**COMPOSITION OF THE EVALUATION TEAM**

- (a) The composition of the evaluation team for a recurrent evaluation should be the same as for the initial evaluation (see AMC4 ARA.FSTD.100(a)(1).
On a case-by-case basis (except for BITD), when a specific FSTD in operation by a specific organisation is being evaluated, the competent authority may reduce the evaluation team to:
- (1) the competent authority's flight inspector; and
 - (2) a type rated instructor (or class rated instructor for FNPT) from a main FSTD user.
- (b) Evaluations with a reduced evaluation team in line with (a) may only take place if:
- (1) this composition is not being used prior to the second recurrent evaluation;
 - (2) such an evaluation is followed by an evaluation with a full competent authority evaluation team;
 - (3) the competent authority's flight inspector performs some spot checks in the area of objective testing;
 - (4) no major change or upgrading has been applied since the directly preceding evaluation;
 - (5) no relocation of the FSTD has taken place since the last evaluation;
 - (6) a system is established enabling the competent authority to monitor and analyse the status of the FSTD on a continuous basis; and
 - (7) the FSTD hardware and software has been working reliably for the previous years. This should be reflected in the number and kind of discrepancies (technical log entries) and the results of the compliance monitoring system audits.
- (c) In the case of a BITD, the recurrent evaluation may be conducted by one suitably qualified flight inspector only, in conjunction with the inspection of any ATO, using the BITD.

ARA.FSTD.130 Changes

- (a) Upon receipt of an application for any changes to the FSTD qualification certificate, the competent authority shall comply with the applicable elements of the initial evaluation procedure requirements as described in ARA.FSTD.100(a) and (b).

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- (b) The competent authority may complete a special evaluation following major changes or when an FSTD appears not to be performing at its initial qualification level.
- (c) The competent authority shall always conduct a special evaluation before granting a higher level of qualification to the FSTD.

AMC1 ARA.FSTD.130 Changes

GENERAL

- (a) The organisation operating an FSTD who wishes to modify, upgrade, de-activate or relocate its FSTD should notify the competent authority. When considering applications for a change of the existing FSTD qualification level, the competent authority should ensure that accountability for the change is clearly defined.
- (b) An individual department manager of the competent authority should be appointed under whose personal authority an FSTD qualification may be changed.
- (c) The written application for a change, including appropriate extracts from the qualification test guide indicating proposed amendments should be submitted in a format and manner as specified by the competent authority. This application should be submitted no later than 30 days before the date of intended change, unless otherwise agreed with the competent authority.
- (d) On receipt of an application for a change of the existing FSTD qualification level, the competent authority should conduct such evaluations and inspections as are necessary to ensure that the full implications of the request have been addressed by the organisation operating the FSTD.
- (e) During the processing of a change request, the continued adequacy of the compliance monitoring should be reviewed.
- (f) When the request has been considered and examined, the competent authority should decide on the depth of inspection of the FSTD that is required.
- (g) The department manager, if satisfied that the organisation operating the FSTD remains competent and the qualification level of the FSTD can be maintained, should issue revised FSTD qualification documentation, as appropriate.
- (h) The competent authority should inform the organisation operating the FSTD of its decision within 30 days of receipt of all documentation where no evaluation is required, or within 14 days of any subsequent evaluation.
- (i) Such documentation includes the appropriate extracts from the QTG amended, when necessary, to the competent authority's satisfaction.

GM1 ARA.FSTD.130 Changes

QUALIFICATION OF NEW TECHNOLOGY OR SYSTEMS

Where an update to an FSTD involves a change of technology or the addition of a new system or equipment that is not covered by the qualification basis used for the existing qualification, an evaluation of such changes may not be possible using this original qualification basis. For these cases, the specific changes can be qualified by using newer Certification Specifications, new AMCs or alternative means of compliance, that apply to these changes, without affecting the overall qualification of the FSTD. This approach should be documented.

ARA.FSTD.135 Findings and corrective actions – FSTD qualification certificate

The competent authority shall limit, suspend or revoke, as applicable, an FSTD qualification certificate in accordance with ARA.GEN.350 in, but not limited to, the following circumstances:

- (a) obtaining the FSTD qualification certificate by falsification of submitted documentary evidence;
- (b) the organisation operating the FSTD can no longer demonstrate that the FSTD complies with its qualification basis; or
- (c) the organisation operating the FSTD no longer complies with the applicable requirements of Part-ORA.

AMC1 ARA.FSTD.135 Findings and corrective actions - FSTD qualification certificate**GENERAL**

(a) The competent authority's inspection and monitoring process should confirm the competent authority's continued confidence in the effectiveness of the compliance monitoring system of the organisation operating an FSTD, and its ability to maintain an adequate standard.

(b) If the competent authority is not satisfied, the organisation operating an FSTD should be informed in writing of the details of the conduct of its operation which are causing the competent authority concern. The competent authority should require corrective action to be taken within a specified period (see AMC2 ARA.FSTD.100(a)(1) point (b)).

(c) In the event that an organisation operating an FSTD fails, in spite of warning and advice, to satisfy the competent authority's concerns, a final written warning should, whenever possible, be given to the organisation together with a firm date by which specified action to satisfy the competent authority should be taken. It should be made clear that failure to comply may result in enforced limitation or suspension of the FSTD's qualification.

(d) Circumstances may, however, preclude recourse to the process described under (a) to (c). In such cases the competent authority's duty to preserve quality of training, testing and checking is of paramount importance and therefore the competent authority may immediately limit or suspend any FSTD qualification which it has issued.

AMC2 ARA.FSTD.135 Findings and corrective actions - FSTD qualification certificate**SUSPENSION AND LIMITATION**

(a) When a decision has been taken to suspend, or limit, an FSTD qualification certificate, the organisation operating an FSTD should be informed immediately by the quickest available means.

(b) In the event of full suspension of an FSTD qualification certificate, the organisation operating an FSTD should be instructed that the FSTD concerned cannot be used for any credited training, testing or checking. The "quickest available means" will in most situations mean the use of a facsimile or email message.

(c) This should be followed by a formal letter giving notice of suspension, or limitation, restating the requirement to cease operations as applicable, and also setting out the conditions on which suspension may be lifted.

(d) If it becomes apparent to the competent authority that all operations have ceased over a period in excess of 6 months, the competent authority should consider opening the warning process described in AMC1 ARA.FSTD.135, points (a) to (d).

(e) The FSTD qualification certificate should not remain suspended indefinitely. Further steps may be taken by the organisation operating an FSTD to reinstate the FSTD qualification or, in default, should be taken by the competent authority to revoke the FSTD qualification certificate. Should an organisation operating an FSTD wish to dispute the suspension of its FSTD's qualification certificate, it should be informed of such rights of appeal as exist under national regulations. If an appeal is lodged, the FSTD qualification may remain suspended until the appeal process is complete.

(f) Suspension of an FSTD qualification certificate may be lifted on appeal or if the organisation operating an FSTD restores the FSTD to its previously acceptable standard.

(g) In neither case should operations be permitted to restart until it has been demonstrated that the cause of the suspension or limitation has been rectified. The competent authority may require a special evaluation depending on the severity of the problem.

(h) The competent authority should issue a formal notice of the lifting of suspension before the organisation operating an FSTD is permitted to resume use of an FSTD.

AMC3 ARA.FSTD.135 Findings and corrective actions - FSTD qualification certificate**REVOCATION**

- (a) The competent authority should give the organisation operating an FSTD notice that it intends to revoke the FSTD qualification followed by a formal letter of revocation.
- (b) Should an organisation operating an FSTD wish to dispute this revocation, it should be informed of such rights of appeal as exist under applicable regulations. Once revoked, there can be no further activities under the terms of the FSTD qualification.

ARA.FSTD.140 Record keeping

In addition to the records required in ARA.GEN.220, the competent authority shall keep and update a list of the qualified FSTDs under its supervision, the dates when evaluations are due and when such evaluations were carried out.

APPENDICES

Appendix I to ANNEX VI PART-ARA - Flight crew licence

The flight crew licence issued by a Member State in accordance with Part-FCL shall conform to the following specifications:

(a) Content. The item number shown shall always be printed in association with the item heading. Items I to XI are the “permanent” items and items XII to XIV are the “variable” items which may appear on a separate or detachable part of the main form. Any separate or detachable part shall be clearly identifiable as part of the licence.

(1) Permanent items:

- (I) State of licence issue;
- (II) title of licence;
- (III) serial number of the licence commencing with the UN country code of the State of licence issue and followed by “FCL” and a code of numbers and/or letters in Arabic numerals and in Latin script;
- (IV) name of holder (in Latin script, even if the script of the national language(s) is other than Latin);
- (IVa) date of birth;
- (V) holder's address;
- (VI) nationality of holder;
- (VII) signature of holder;
- (VIII) competent authority and, where necessary, conditions under which the licence was issued;
- (IX) certification of validity and authorisation for the privileges granted;
- (X) signature of the officer issuing the licence and the date of issue; and
- (XI) seal or stamp of the competent authority.

(2) Variable items:

- (XII) ratings and certificates: class, type, instructor certificates, etc., with dates of expiry. Radio telephony (R/T) privileges may appear on the licence form or on a separate certificate;
- (XIII) remarks: i.e. special endorsements relating to limitations and endorsements for privileges, including endorsements of language proficiency, ratings for Annex II aircraft when used for commercial air transportation; and
- (XIV) any other details required by the competent authority (e.g. place of birth/place of origin).

(b) Material. The paper or other material used will prevent or readily show any alterations or erasures. Any entries or deletions to the form will be clearly authorised by the competent authority.

(c) Language. Licences shall be written in the national language(s) and in English and such other languages as the competent authority deems appropriate.

Cover page

<p>Competent authority name and logo</p> <p>(English and any language(s) determined by the competent authority)</p> <p>EUROPEAN UNION</p> <p>(English only)</p> <p>FLIGHT CREW LICENCE</p> <p>(English and any language(s) determined by the competent authority)</p> <p>Issued in accordance with Part-FCL</p> <p>This licence complies with ICAO standards, except for the LAPL and EIR privileges</p> <p>(English and any language(s) determined by the competent authority)</p> <p>EASA Form 141 Issue 2</p>	<p>Requirements</p> <p>"European Union" to be deleted for non-EU Member States</p> <p>Size of each page shall be one eighth A4</p>
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Page 2

I	State of issue	Requirements
III	Licence number	Serial number of the licence will always commence with the UN country code of the State of licence issue followed by ".FCL".
IV	Last and first name of holder	
IVa	Date of birth (see instructions)	Standard date format is to be used, dd/mm/yyyy in full.
XIV	Place of birth	
V	Address of holder: Street, town, area, postal code	
VI	Nationality	
VII	Signature of holder	
VIII	Issuing competent authority E.g. This CPL(A) has been issued on the basis of an ATPL issued by (third county)	
X	Signature of issuing officer and date	
XI	Seal or stamp of issuing competent authority	

Page 3

II	Title of the licence, date of initial issue and country code	Abbreviations used will be as used in Part-FCL (e.g. PPL(H), ATPL(A), etc.) Standard date format is to be used, dd/mm/yyyy in full.
IX	Validity: The privileges of the licence shall be exercised only if the holder has a valid medical certificate for the required privilege. A document containing a photo shall be carried for the purposes of identification of the licence holder.	This document is not specified, but a passport would suffice when outside the State of licence issue.
XII	Radiotelephony privileges: The holder of this licence has demonstrated competence to operate R/T equipment on board aircraft in (specify the language(s)).	
XIII	Remarks: Language Proficiency: (language(s)/level/validity date)	All additional licensing information required and privileges established by ICAO, EC or EU Directives/Regulations to be entered here. Language proficiency endorsement(s), level and validity date shall be included. In case of LAPL: LAPL not issued in accordance with ICAO standards

Additional pages — Requirements:

Pages 1, 2, and 3 of the licence shall be in accordance with the format laid down in the model in this point. The competent authority shall include additional customized pages containing tables which shall contain at least the following information:

- Ratings, certificates, endorsements and privileges;
- Expiry dates of the ratings, the instructor and examiner certificate privileges;
- Dates of the test or check;
- Remarks and restrictions (operational limitations);
- Fields for the examiner and/or instructor certificate number and signature, as applicable;
- Abbreviations.

These additional pages are intended for use by the competent authority, or by specifically authorised instructors or examiners.

Initial issues of ratings or certificates shall be entered by the competent authority. Revalidation or renewal of ratings or certificates may be entered by the competent authority or by specifically authorised instructors or examiners.

Operational limitations shall be entered in “Remarks and Restrictions” against the appropriate restricted privilege, e.g. IR skill test taken with co-pilot, restricted instruction privileges to 1 aircraft type.

Ratings that are not validated may be removed from the licence by the competent authority.

Appendix II to ANNEX VI PART-ARA - Standard EASA format for cabin crew attestations

Cabin crew attestations issued in accordance with Part-CC in a Member State shall conform to the following specifications:

<p style="text-align: center;">1. CABIN CREW ATTESTATION Issued in accordance with Part-CC</p> <p>2. Reference number:</p> <p>3. State of issue:</p> <p>4. Full name of holder:</p> <p>5. Date and place of birth:</p> <p>6. Nationality:</p> <p>7. Signature of holder:</p> <p>8. Competent authority:</p> <p>9. Issuing body: <i>Official seal, Stamp or Logo</i></p> <p>10. Signature of issuing officer:</p> <p>11. Date of issue:</p> <p>12. The holder may only exercise the privileges to act as cabin crew on aircraft engaged in commercial air transport operations if he/she complies with the requirements in Part-CC for continuous fitness and valid aircraft type qualifications.</p> <p>EASA Form 142 Issue 1</p>
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Instructions:

(a) The cabin crew attestation shall include all items specified in EASA Form 142 in accordance with items 1 -

12 as listed and described below.

(b) Size shall be either 105mm × 74mm (one-eighth A4) or 85mm × 54mm, and the material used shall prevent or readily show any alterations or erasures.

(c) The document shall be printed in English and such other languages as the competent authority deems appropriate.

(d) The document shall be issued by the competent authority or by an organisation approved to issue cabin crew attestations. In that latter case reference to the approval by the competent authority of the Member State shall be stated.

(e) The cabin crew attestation is recognised in all Member States and it is not necessary to exchange the document when working in another Member State.

Item 1 : The title "CABIN CREW ATTESTATION" and the reference to Part-CC.

Item 2 : Attestation reference number shall commence with the UN country code of the Member State followed by at least the two last numbers of the year of issue and an individual reference/number according to a code established by the competent authority (e.g. BE-08-xxxx).

Item 3 : The Member State where the attestation is issued.

Item 4 : The full name (surname and first name) stated in the official identity document of the holder.

Items 5 and 6 : Date and place of birth as well as nationality as stated in the official identity document of the holder.

Item 7 : The signature of the holder.

Item 8: Identification details of the competent authority of the Member State where the attestation is issued shall be entered and shall provide the full name of the competent authority, postal address, and official seal, stamp or logo as applicable.

Item 9 : If the competent authority is the issuing body, the term "competent authority" and official seal, stamp or logo shall be entered. In this case only, the competent authority may determine if its official seal, stamp or logo shall also be entered under Item 8.

In the case of an approved organisation, identification details shall be entered and shall at least provide the full name of the organisation, postal address and if applicable, the logo and:

(a) in the case of a commercial air transport operator, the air operator certificate (AOC) number and detailed reference to the approvals by the competent authority to provide cabin crew training and to issue attestations;

or

(b) in the case of an approved training organisation, the reference number of the relevant approval by the competent authority.

Item 10 : The signature of the officer acting on behalf of the issuing body.

Item 11 : Standard date format shall be used: i.e. day/month/year in full (e.g. 22/02/2008).

Item 12 : The same sentence in English and its full and precise translation into such other languages as the competent authority deems appropriate.

Appendix III to ANNEX VI PART-ARA - CERTIFICATE FOR APPROVED TRAINING ORGANISATIONS (ATOs)

**European Union (*)
Competent Authority**

APPROVED TRAINING ORGANISATION CERTIFICATE

[CERTIFICATE NUMBER/REFERENCE]

Pursuant to Commission Regulation (EU) No 1178/2011 and subject to the conditions specified below, the

[Competent Authority] hereby certifies

[NAME OF THE TRAINING ORGANISATION]

[ADDRESS OF THE TRAINING ORGANISATION]

as a Part-ORA certified training organisation with the privilege to provide Part-FCL training courses, including the use of FSTDs, as listed in the attached training course approval.

CONDITIONS:

This certificate is limited to the privileges and the scope of providing the training courses, including the use of

FSTDs, as listed in the attached training course approval.

This certificate is valid whilst the approved organisation remains in compliance with Part-ORA, Part-FCL and other applicable regulations.

Subject to compliance with the foregoing conditions, this certificate shall remain valid unless the certificate has been surrendered, superseded, limited, suspended or revoked.

Date of issue:

Signed:

[Competent Authority]

(*) "European Union" to be deleted for non-EU Member States.

APPROVED TRAINING ORGANISATION CERTIFICATE
TRAINING COURSE APPROVAL

Attachment to ATO Certificate Number:

[CERTIFICATE NUMBER/REFERENCE]

[NAME OF THE TRAINING ORGANISATION]

has obtained the privilege to provide and conduct the following Part-FCL training courses and to use the following FSTDs:

Training course	Used FSTD(s), including letter code (1)

(1) As indicated on the qualification certificate.

This training course approval is valid as long as:

- (a) the ATO certificate has not been surrendered, superseded, limited, suspended or revoked; and
- (b) all operations are conducted in compliance with Part-ORA, Part-FCL, other applicable regulations, and, when relevant, with the procedures in the organisation's documentation as required by Part-ORA.

Date of issue:

Signed: [Competent Authority]

For the Member State/EASA

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Appendix IV to ANNEX VI PART-ARA - FLIGHT SIMULATION TRAINING DEVICE QUALIFICATION CERTIFICATE

Introduction

EASA Form 145 shall be used for the FSTD qualification certificate. This document shall contain the FSTD

Specification including any limitation(s) and special authorisation(s) or approval(s) as appropriate to the FSTD concerned. The qualification certificate shall be printed in English and in any other language(s) determined by the competent authority.

Convertible FSTDs shall have a separate qualification certificate for each aircraft type. Different engine and equipment fit on one FSTD shall not require separate qualification certificates. All qualification certificates shall carry a serial number prefixed by a code in letters, which shall be specific to that FSTD. The letter code shall be specific to the competent authority of issue.

European Union (*)
Competent Authority

FLIGHT SIMULATION TRAINING DEVICE QUALIFICATION CERTIFICATE

REFERENCE:

Pursuant to Commission Regulation (EU) No 1178/2011 and subject to the conditions specified below, the [competent authority] hereby certifies that

FSTD [TYPE AND LETTER CODE]

located at [NAME and ADDRESS OF THE ORGANISATION]

has satisfied the qualification requirements prescribed in Part-OR, subject to the conditions of the attached FSTD specification

This qualification certificate shall remain valid subject to the FSTD and the holder of the qualification certificate remaining in compliance with the applicable requirements of Part-OR, unless it has been surrendered, superseded, suspended or revoked.

Date of issue:

Signed:

[competent authority]
FSTD QUALIFICATION CERTIFICATE: [Reference]
FSTD SPECIFICATIONS

- A. Type or variant of aircraft:
- B. FSTD qualification level:
- C. Primary reference document:
- D. Visual system:
- E. Motion system:
- F. Engine fit:
- G. Instrument fit:
- H. ACAS fit:
- I. Windshear:
- J. Additional capabilities:
- K. Restrictions or limitations:

L. Guidance information for training, testing and checking considerations					
CAT I	RVR	m	DH	ft	
CAT II	RVR	m	DH	ft	
CAT III	RVR	m	DH	ft	
(lowest minimum)					
LVTO	RVR	m			
Recency					
IFR-training/check					
					/
Type rating					
Proficiency checks					
Autocoupled approach					
					/
Autoland/roll out guidance					
					/
ACAS I/II					
					/
Windshear warning system/predictive windshear					
					/
WX-radar					
					/
HUD/HUGS					
					/
FANS					
					/
GPWS/EGPWS					
					/
ETOPS capability					
GPS					
Other					

Date of issue:

Signed:

Appendix V to ANNEX VI PART-ARA - Certificate for Aeromedical Centres (AeMCs)

CERTIFICATE FOR AERO-MEDICAL CENTRES (AeMCs)

European Union ⁽¹⁾

Competent Authority

AERO-MEDICAL CENTRE CERTIFICATE

REFERENCE:

Pursuant to Commission Regulation (EU) No 1178/2011 and subject to the conditions specified below, the [competent authority] hereby certifies

[NAME OF THE ORGANISATION]

[ADDRESS OF THE ORGANISATION]

as a Part-ORA certified Aero-medical centre with the privileges and the scope of activities as listed in the attached terms of approval.

CONDITIONS:

1. This certificate is limited to that specified in the scope of approval section of the approved organisation manual;
2. This certificate requires compliance with the procedures specified in the organisation documentation as required by Part-ORA.
3. This certificate shall remain valid subject to compliance with the requirements of Part-ORA unless it has been surrendered, superseded, suspended or revoked.

Date of issue Signed:

⁽¹⁾ 'European Union' to be deleted for non-EU Member States
EASA Form 146 Issue 1'

Appendix VI to ANNEX VI PART-ARA

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Appendix VII to ANNEX VI PART-ARA - Certificate for Aeromedical Examiners (AMEs)

CERTIFICATE FOR AERO-MEDICAL EXAMINERS (AMEs)

European Union (*)

Competent Authority

AERO-MEDICAL EXAMINER CERTIFICATE

CERTIFICATE NUMBER/REFERENCE:

Pursuant to Commission Regulation (EU) No 1178/2011 and subject to the conditions specified below, the [competent authority] hereby certifies

[NAME OF THE AERO-MEDICAL EXAMINER]

[ADDRESS OF THE AERO-MEDICAL EXAMINER]

as aero-medical examiner

CONDITIONS:

1. This certificate is limited to the privileges specified in the attachment to this AME certificate;
2. This certificate requires compliance with the implementing rules and procedures specified in Part-MED.
3. This certificate shall remain valid for a period of 3 years until [xx/yy/yyyy (**)] subject to compliance with the requirements of Part-MED unless it has been surrendered, superseded, suspended or revoked.

Date of issue: xx/yy/yyyy

Signature: [Competent Authority]

(*) 'European Union' to be deleted for non-EU Member States

(**) Expiry date: day/month/year

AERO-MEDICAL EXAMINER CERTIFICATE

Attachment to AME certificate number:

PRIVILEGES AND SCOPE

[Name and academic title of the aero-medical examiner] has obtained the privilege(s) to undertake aero-medical examinations and assessments for the issuance of medical certificates as stated in the table below and to issue these medical certificates for:

LAPL	[yes/date]
Class 2	[yes/date]
Class 1 revalidation/renewal	[yes/date]/[no]

Date of issue: xx/yy/zzzz

Signature: [Competent Authority]