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| **Organisation / Operator is required to forward this form duly completed and signed to:****Director General Civil Aviation Regulations (DGCAR)****Flight Safety Department,** **Civil Aviation Authority (CAA) Oman,****Muscat, P.O. Box: 1, Code 111,****Sultanate of Oman** |

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| **Details of Management Personnel required to be approved/accepted as specified:** *(Please select X in the boxes provided)*  |
| **A 1. Application for the Position of Nominated Post Holders - CAR OPS 1.175 (i),(j),(t)** |
|  [ ]  Accountable Manager | [ ]  Flight Operations | [ ]  The Maintenance System |
| [ ]  Crew Training | [ ]  Ground Operations | [ ]  Aviation Security |
| [ ]  Quality Assurance | [ ]  Safety Management System | [ ]  Other Specify: |
| **A 2. Application for Management Personnel required to be approved/accepted as specified in:** |
| [ ]  CAR M Part 0 - 0.3  | [ ]  CAR 145.A.30 | [ ]  CAR 21 Article 5 |
| Position Title: |  | Position Title: |  | Position Title: |  |
| [ ]  CAR 147.A.105(b) |  |  |
| Position Title: |  |  |  |
| **A 3. Application for Other Nominated Personnel / Focal Point of Contact required to be approved or accepted:** |
| [ ]  Dangerous Goods | [ ]  SEP Manager (Training) | [ ]  Other Specify: |
| **Attach the followings:** [ ]  Nomination Letter [ ]  Passport Copy [ ]  Curriculum Vitae (CV)\* [ ]  Relevant Certificates |
| *Note:* *1. For* ***Accountable Manager*** *position* ***The Chairman*** *shall sign this application form (Item F)**2. Unless under exceptional circumstances a period of processing will be completed within a period of 10 working days**\* CV shall be Self Attested by the Candidate* |

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| **B. Organization/Operator Details**  |
| Organisation Name: |  | Date of Application: dd/mm/yyyy |  |
| Certificate / Authorization No:E.g. AOC/AOP, AMO, CAMO |  |
| Address: |  | Contact No: |  |
| Email:  |  | Webpage Address:  |  |

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| **C. Candidate Details** |
| Full Name: | First:  | Middle: | Surname: |
| Position within Organisation: |  |
| Document/Passport/ID No: | Passport:  | ID: |
| Date of Birth: dd/mm/yyyy |  |
| Nationality: |  |
| Address: |  |
| Phone: |  |
| E-mail: |  |

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| **D. Employment History (Record Date in Sequence)** *Brief description of Work Experience relevant to the position applied* *Note: 1. Details of employment & positions: Last 10yrs relevant to the position* *2. Add Separate Sheet if Necessary* |
| Organization’s/Operator’s Name: | Date: dd/mm/yyyy |
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| **E. Brief Description of Qualifications relevant to the position applied:***Brief Qualification: Last 10yrs relevant to the position applied**Note: Add Separate Sheet if Necessary* |
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| **F. Declaration** |
| **I hereby certify Nominated Post Holder’s/ Nominated Personnel has met the experience and requirements set by The Civil Aviation Authority (CAA) Sultanate of Oman applicable Civil Aviation Regulations (CARs)***Note: For* ***Accountable Manager*** *position* ***The Chairman*** *shall sign this application form* |
| **Name of Chairman / Accountable Manager:** | **Signature:** | **Date: dd/mm/yyyy** | **Organization / Operator Official Stamp** |
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| **FOR CAA USE ONLY****CAA Authorised staff Accepting / Approving /Rejecting this person assigned for position:****Name: Position/Title:**  |
| **☐ Approved ☐ Accepted ☐ Rejected (reason/s)****Remarks:** |
| **Designation:** | **CAA Stamp** |
| **Name:**  |
| **Signature:** |
| **Date:** |

***Note: The applicant shall reserve this form (AWR OPS 032 / Form 4) signed and stamped by CAA.***