**Please complete the form in BLOCK CAPITALS after reading the attached guidance.**

|  |
| --- |
| **INSTRUCTIONS**  **1. APPLICATION (tick appropriate box)**  I am applying for: Initial, Revalidation  **2. ORGANIZATION DETAILS**  Specify Organization name, Address, Telephone number, Fax number, Email, Owners Name & Address (if  applicable)  **3. Designated Chief or Lead Instructor for the course to which this application relates:**  Specify Name, Address, Telephone number, Fax number, Email, Other information (if applicable)  **4. Location where Courses are to take place:**  Specify Name, Address of the location where courses will be conducted  **5. Applicant’s Details:**  Specify Applicant’s Name, Position and place signature and date of signing  **6. Enclosures (tick appropriate box)**  Submission of all course manuals, course syllabus and documents to accompany this application.  **7. For CAA official use only** |

|  |  |  |  |
| --- | --- | --- | --- |
| **1-Application** | **INITIAL** | **REVALIDATION/RECURRENT** | |
| **2**. **Organization Details** | | | |
| Operator/Organization Name |  | Telephone No: |  |
| Address: |  | Fax: |  |
| Website: |  | Email: |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **3. Designated Chief or Lead Instructor for the course to which this application relates:** | | | | |
| Name: | |  | Email: |  |
| Telephone No: | |  | Others: |  |
| Fax: | |  |  |  |
| **4. Location where Courses or conduct of training are to take place:** | | | | |
| Name of location: | |  | Address: |  |
| **5. Applicant’s Details:** | | | | |
| Name: |  | | | |
| Signature: |  | | Date: |  |
| Position in Organization: |  | | | |

|  |
| --- |
| **6. Attachments (Please provide the documents below)** |
| Candidate training Certificates: Aircraft type, OCC, Differences, Conversion, Recurrent and Crew in Charge  Course Manual  Course Syllabus  Curriculum Vitae  *Note:**Initial application is to be accompanied by a curriculum vitae of the nominee’s reflecting his previous positions held, training courses conducted and recent experience.* |
| **Safety Emergency Procedure Instructor (SEPI)**  **CAR OPS 1.1039 / AMC: 1.1039**  *Pre-requisite qualifications required prior to the acceptance granted by the Authority to perform the duties of SEP instructor:* |
| Cabin Crew line operational experience for a minimum of five (5) years’ in the capacity of an In-Charge Cabin crew; **OR** |
| Minimum of continuous three (3) years’ experience in a training role within the aviation industry. |
| Recognized relevant qualification in Training (Train the Trainer), or preferably holds an instructor qualification in Cabin  Crew CRM and/or Human Factors. |
| Evidence of favourable record as a crewmember from Operator. |
| Prove of training background experience in course development, delivery and assessment. |
| Proficient in computer skills, and the ability to use multimedia as a training tool including experience in course design. |
| **Aviation Medical and First Aid Instructor.**  **CAR OPS 1.1040**  *Pre-requisite qualifications required prior to granting of acceptance by the Authority to perform the duties of Aviation Medical and First Aid Instructor:* |
| Hold an acceptable Registered Nurse Certificate. |
| Hold a recognized First Aid Instructor Certificate preferably in Aviation Medicine. |
| Evidence of previous possession of a license indicating they have operated as a first aid responder, Emergency Medical  Technician (EMT), Paramedic or nurse. |
| Proficient in computer skills, and the ability to use multimedia as a training tool including experience in course design. |
| Additional advantage is to have the Train the Trainer Certificate. |
| Hold an OJT certification |
| Prove of training background experience in course development, delivery and assessment. |
| Additional advantage is to have a recognized Bachelor Degree of Nursing (recognised or accepted within Oman). |
| *Note: - To attend a cabin crew initial and conversion training to have exposure of the working environment.* |
| **Crew Resource Management (CRM)**  **AMC-1 OPS-1.1005/1.1010/1.1015 (9) (c)** |
| Have suitable experience of commercial air transport as a cabin crew member; and |
| Completed training on Human Factors Performance Limitations (HPL) and |
| Have completed the applicable CRM Course and the Operator’s CRM training; and |
| Have received instructions in training skills in order to conduct the Cabin Crew CRM courses; and |
| Have received additional training in the fields of group management, group dynamics and personal awareness. |
| Have demonstrated the knowledge, skills and credibility required to train the CRM Training elements in the non-operational environment, as specified in Table 1, Appendix 2 to CAR OPS-1.1005/1.1010/ 1.1015. |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personnel Responsible for training Flight Crew and Cabin Crew Dangerous Goods. (**Dangerous Goods Instructors) | | | | | | | | | | | |
| For personnel responsible for training Flight Crew and Cabin Crew, the instructor must hold current certification in DGR CBTA function of Personnel Responsible for Processing or Accepting Dangerous Goods consignments and IATA Professional Skills for Dangerous Goods Instructors training. | | | | | | | | | | | |
| A minimum of five (05) years working experience in Air cargo operations, with a minimum of three (03) years in acceptance, handling and loading of dangerous goods including providing the NOTOC (Notification to the Captain) to the flight crew of an aircraft. | | | | | | | | | | | |
| Who is not in compliance with the above requirement, shall undertake a practical familiarization in acceptance, handling and loading of dangerous goods including providing the NOTOC (Notification to the Captain) to the flight crew of an aircraft under a senior DGR instructor approved in the CBTA function Personnel responsible for processing or accepting dangerous goods consignments. | | | | | | | | | | | |
| Evidence of CAA approved content and duration of the practical familiarization documents | | | | | | | | | | | |
| Instructors shall demonstrate Dangerous Goods Regulations adequate technical knowledge in the function related to his/her training responsibilities and instructional skills to CAA officials. | | | | | | | | | | | |
| The dangerous goods instructors shall undergo a simulated or a practical activity every three (03) years in the function related to his/her training responsibilities. | | | | | | | | | | | |
| Renewal of Dangerous Goods Training Certification, two (02) months prior to expiry. | | | | | | | | | | | |
| Training record with current Dangerous Goods Regulations certificate in the applicable job function commensurate with his/her training delivery along with the training skills certificate. | | | | | | | | | | | |
| Submit training material (for each job function, hard and soft copies) which shall include lesson plan, audio/visual aids, PowerPoint presentations, handouts, workbooks, classroom exercises with answers. | | | | | | | | | | | |
| Submit three (03) separate examination papers/assessment (for each category/job function, hard and soft copies) showing all answers and associated marks to be awarded for each question. | | | | | | | | | | | |
| Submit a copy of the yearly training schedule | | | | | | | | | | | |
| **Aviation Security Instructor for training Flight Crew and Cabin Crew** | | | | | | | | | | | |
| Minimum of 5 years’ experience in Aviation Security with adequate knowledge and skills in the work environment. | | | | | | | | | | | |
| Knowledge of Aviation Security Regulations, Cabin procedures and practices. | | | | | | | | | | | |
| An AVSEC Instructor is required to be subject matter expert in the courses he/she will be delivering. | | | | | | | | | | | |
| Had completed relevant training in Aviation Security Training course’s conducted in an Institution or Organization approved or accredited by ICAO IATA or by CAA. | | | | | | | | | | | |
| Acceptance is not equivalent or a substitute to Instructor Certification.  Candidate who is not certified shall be required to undergo AVSEC Instructor certification within six (6) months from the date of acceptance. | | | | | | | | | | | |
| Additional advantage is to have the Train the Trainer Certificate. | | | | | | | | | | | |
| **Declaration by Operator** *(please tick necessary box)* | | | | | | | | | | | |
| The nominee is hereby requested to act as an Instructor for: | | | | | | | | | | | |
| CRM | | First Aid | | | AVSEC | | DGR | | SEP | | |
| Include Aircraft Type | | | | | Others *(please specify):* | | | | | | |
| The nominee is personally suitable and; | | | | | | | | | | | |
|  | Has a thorough knowledge of the relevant Course Material as in applicable regulations and organisation related. | | | | | | | | | | |
|  | Has completed the approved initial or recurrent training programme for those who have previously held an Instructor Rating. | | | | | | | | | | |
|  | Is fully competent of the aircraft type(s) and meets the recency for applicable aircraft. | | | | | | | | | | |
|  | Trained & recommended by: | | |  | | | | | | | |
|  | Instructor Name: | | |  | | | | | | Date: |  |
|  | Signature: | | |  | | | | | | | |
| **CAA use only** | | | | | | | | | | | |
| **Name of Cabin Safety Inspector Assigned:** | | | | | |  | | | | | |
| Approved/Accepted | | | Rejected | | | | | Approved /Accepted with Limitations | | | |
| State Limitations (if any) | | |  | | | | | | | | |