


	TANZANIA CIVIL AVIATION AUTHORITY DIRECTORATE OF SAFETY REGULATIONS PERSONNEL LICENCING	Revision: Form
Document No.: TCAA-FRM-SR-PEL062	Title: Application for Designation as ELP Rater	Page 1 of 2

A. PERSONAL INFORMATION		
Applicant name:		
Name of employer:		
Nationality		
Physical address:		
Postal address		
Type of licence:		
Licence number:		
Validity:		
Email Address:		
Location:		
B. EXPERIENCE		
Language Assessment Experience (Years)		
Previous ELP Rater Designation (if any)		
Aviation English Experience		
C. TRAINING AND QUALIFICATIONS	ORGANIZATION	YEAR
ICAO ELP Rater Training		
Recurrent ELP Training:		
English Proficiency Level		
D. DOCUMENTS REQUIRED		
i. Copy of ATC licence		
ii. Copy of ICAO ELP training certificate:		
iii. Passport/National ID		
iv. Curriculum vitae (CV)		
E. DECLARATION		
I declare that I will conduct ELP assessments in accordance with ICAO Annex 1, the ICAO Rating Scale, and Regulation 8 of the Civil Aviation (Personnel Licensing) Regulations, 2027 as amended.		

	<p style="text-align: center;">TANZANIA CIVIL AVIATION AUTHORITY DIRECTORATE OF SAFETY REGULATIONS PERSONNEL LICENCING</p>	Revision: Form
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Applicant signature:.....		Date:.....	
F. FOR OFFICIAL USE			
Eligibility check:	<input type="checkbox"/> Acceptable	<input type="checkbox"/> Not Acceptable	
Interview required	<input type="checkbox"/> Yes:	<input type="checkbox"/> No:	
Final recommendation	<input type="checkbox"/> Approve	<input type="checkbox"/> Reject.	
Name of Inspector:			
Signature:			Date: