



TANZANIA CIVIL AVIATION AUTHORITY
DIRECTORATE OF SAFETY REGULATIONS
PERSONNEL LICENSING

Revision: 4

Form

Document No.:
TCAA -FRM-SR-PEL010D


Title: **Application form for Initial/Renewal of Flight Operations Officer/Dispatcher Licence.**

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IMPORTANT NOTICES

1. This form, when completed, should be forwarded to TCAA Personnel Licensing Office via email: pel@caa.go.tz
2. Evidence of qualifications must meet the requirements for the issue of the licence/renewal.
3. All dates are written in dd/mm/yy
4. All items in Part A must be filled correctly
5. (*) The star stands for compulsory/mandatory
6. All items in Part C must be uploaded in the online system

| SN | PART A: PERSONAL PARTICULARS INFORMATION | | |
|----|--|----------------------------|----------------------------|
| 1 | Surname: | First Name: | Another name: |
| 2 | Nationality: | | |
| 3 | Date of Birth: | | Place of Birth: |
| 4 | Permanent Address: | | |
| 5 | Telephone number | | |
| 6 | Gender: | M <input type="checkbox"/> | F <input type="checkbox"/> |
| 7 | Email Address: | | |
| 8 | Name(s) of the Organization/Company at which tasks were performed: _____ | | |
| 9 | *Initial application | | * Renewal Application |
| 10 | PARTICULARS OF LICENCE ALREADY HELD: | | |
| | Place of Issue | Date of Issue | Licence No. |
| | | | |
| | | | |
| | | | |
| 11 | Last date of exercising the privileges of the Licence (if any) _____ | | |
| | | | |

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|--|--|--------------------------------|
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PART C: Documents required to upload Initial / Renewal

| | |
|----|--|
| 1. | Upload a copy of National ID/passport: |
| 2. | Upload academic certificate: |
| 3. | Upload ATO Flight Operation officer Certificate: |
| 4. | Upload Transcript (examinations results from ATO): |
| 5. | Upload field Report(logbook). |
| 6. | Payment receipt: |
| 7. | Experience renewal form: |
| 8. | Copy of licence: |
| 9. | Air law examination results: |

PART D: DECLARATION

I hereby certify that the information provided in this form is true, complete, and correct to the best of my knowledge and belief. I understand that withholding or misrepresenting information may result in rejection of this application or cancellation of my license.

| | | |
|----------------------|--|-------|
| Applicant Signature: | | Date: |
|----------------------|--|-------|

FOR OFFICIAL USE ONLY

| | |
|--|--|
| Application Received Date: | |
| Remarks: ACCEPTED/ REJECTED: | |
| Reason (If rejected): | |
| Documents verified by PEL Officer/Inspector: | |
| Date | |
| Signature | |