

## APPLICATION TO OBTAIN INITIAL CPL / ATPL FOR MILITARY PILOTS

**Notes:** Please complete this form online (preferred method) then print, sign and submit as instructed. Alternatively, print, then complete in **BLOCK CAPITALS** using black or dark blue ink.

### 1. APPLICANT DETAILS

To be completed by the Applicant

Title:.....Name of the Applicant:.....  
Date of Birth (dd/mm/yyyy): ..... Nationality .....  
Place of Birth: ..... Country of Birth:.....  
Permanent / Postal Address:.....  
..... Country: ..... Postcode:.....  
Email : .....  
Telephone Numbers: Res./Mobile:.....  
(incl. area code) Office: .....  
Fax No.: .....

A certified copy of your valid Passport, National Identity Card must accompany your application as proof of identification.

### 2. QUALIFICATION & EXPERIENCE

To be completed by the Applicant

Fast Engine Jets  Total Flying Hours: .....  
Operational Category to Operate Military Multi-Pilot Aircraft  Total Flying Hours: .....

### 3. DETAILS OF EXPERIENCE

To be completed by the Applicant

	Type	Aeroplanes		Helicopters			
				Single Engine		Multi Engine	
		Day	Night	Day	Night	Day	Night
Flight Time as Pilot (do not add taxi time to military logbook times)	Single Engine						
	Multi Engine						
	Multi Pilot Aircraft						
	Turbine/Turbo Prop.						
	<i>Total:</i>						

### 4. DECLARATION OF APPLICANT

To be completed by the Applicant

I hereby declare that the information provided on this form is correct.

Name: ..... Signature:..... Date (dd/mm/yyyy):.....

### 5. DECLARATION BY ORGANIZATION AUTHORIZED PERSON

I hereby confirm that the information provided by the applicant regarding Military experience is correct.

Organization Name: .....

Name of Authorized Person: .....

Designation: .....

Signature: ..... Date: .....

### 6. DELIVERY & PAYMENT INSTRUCTIONS:

This form, when completed, should be forwarded and must be accompanied by the appropriate fee to:

**Directorate General of Civil Aviation, Aviation Safety Department, P.O. Box 17, Safat 13001, State of Kuwait.**

Tel: (965) 24743940, 24342475 / Fax: (965) 24765796 OR Email: [safety@dgca.gov.kw](mailto:safety@dgca.gov.kw)

**Note: For Fees refer to Kuwait Civil Aviation Safety Regulations Part 27 Charges and Fees**

Cheque, Demand Draft etc. made payable in favour of DIRECTORATE GENERAL OF CIVIL AVIATION, or Telex Transfer directly to our Account at;

CONFIRMATION OF BANK DETAILS	
Name of Bank	CENTRAL BANK OF KUWAIT
Branch	KUWAIT
Account Name	DIRECTORATE GENERAL OF CIVIL AVIATION
Account Number	11023041
IBAN Number	KW 17 CB KU 0000000000000011023041
Bank Code/ Sort Code/ Swift Code	CBKUKWKW
Currency of Payment	KWD

### 7. DOCUMENTS REQUIRED:

1	Covering Letter from the company	10	Last Proficiency Check form (Aircraft & Simulator)
2	Application Form No: 1336 duly filled & Signed	11	Aircraft Training Form (date of aircraft training done)
3	To whom it may concern letter from Kuwait Airforce	12	Copy of Nationality Certificate (Kuwaiti) or copy of Residency permit in the passport (non-Kuwaiti)
4	Letter for Total flying hours from Kuwait Airforce	13	Copy of valid civil ID
5	Skill test form duly completed and certified by DGCA	14	Applicable English Language Proficiency Rating letter (Level 4 or higher).
6	Valid Class 1 medical certificate	15	4 recent photograph in uniform (2" x 3" Size) in uniform with a light blue background.
7	Copy of emergency licence	16	Copy of the DGCA letter showing the applicant has passed DGCA technical examination
8	Valid Instrument Rating form.	17	Prescribed Fee (refer to Kuwait Civil Aviation Safety Regulations Part 27 Charges and Fees)
9	Flying logbook original and copy.		

### DGCA USE ONLY

Remarks (If any):

The application is Accepted  Rejected  Documents are in order and valid

Authorized Stamp & Signature:

Date: