

	Department:	FLIGHT OPERATIONS	Form Number: CA 121-38
	Telephone number:	0860 267 435	Email address:
	Physical address	12 Byls Bridge Boulevard, Building No 2, Byls Bridge Office Park Centurion	
	Postal address:	Private Bag X73, Halfway House 1685	Website: <a href="http://www.caa.co.za">www.caa.co.za</a>
	<b>APPLICATION FOR COMPANY CHECK PILOT APPROVAL</b>		

<b>1. PARTICULARS REGARDING THE APPLICANT/HOLDER</b>							
1.1.	Full name of organization						
1.2.	Trade name, if applicable						
1.3.	Air Service License Number						
1.4.	Base of Operation address			1.5.	Postal address		
		Postal code				Postal code	
1.6.	Cellular phone number			1.7.	Fax number		
1.8.	Telephone number			1.9.	E-mail address		
<b>2. PARTICULARS REGARDING THE COMPANY CHECK PILOT</b>							
2.1.	Surname			2.2.	Initials		
2.3.	License Number			2.4.	Cell phone number		
2.5.	Email address						
2.6.	Postal Address						
						Postal code	
<i>Supporting documentation to accompany the application in accordance with the qualification requirements.</i>							
<b>3. QUALIFICATIONS</b>							
	<b>DOCUMENT</b>			<b>N/A</b>	<b>YES</b>	<b>NO</b>	
3.1.	Valid license						
3.2.	Valid Instrument Rating (if applicable)						
3.3.	Valid medical certificate						
3.4.	Type Rating						
3.5.	Currently qualified for line flying on the type of aeroplane						
3.6.	Adequately demonstrated competency during the completion of SA-CATS 121.03.3 6						
3.7.	Be qualified to perform PF and PNF duties while occupying either flight crew member seat						
3.8.	Know the content of the AFM, SOPs or AOM, if applicable, special equipment manuals, as appropriate, operator's operations and training manuals as applicable to the aeroplane type						
3.9.	Practical and theoretical knowledge of the administrative procedures with respect to the established trainee progress forms						
3.10.	Practical and theoretical knowledge of the system of record keeping approved to be used in conjunction with the training programme						
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3.11.	Certified in his or her training file as authorised by the operator to conduct line checks as specified in such certification			
<b>DECLARATION:</b>				
<i>I, the undersigned</i>				<i>hereby declare that</i>
<i>the above employee is qualified in the above and to the best of my knowledge, the particulars contained in this application are accurate in every respect.</i>				
	<b>SIGNATURE OF COMPANY CHECK PILOT</b>	<b>NAME IN BLOCKLETTERS</b>		<b>DATE</b>
	<b>SIGNATURE OF COMPANY REPRESENTATIVE</b>	<b>NAME IN BLOCKLETTERS</b>		<b>DATE</b>
	<b>CAPACITY OF SIGNATORY</b>			

**SACAA OFFICE**

<b>ACCEPTED</b>		<b>NOT ACCEPTED</b>	
<b>SIGNATURE OF FLIGHT OPERATIONS INSPECTOR</b>	<b>NAME IN BLOCKLETTERS</b>		<b>DATE</b>

<b>APPROVED</b>		<b>NOT APPROVED</b>	
<b>SIGNATURE OF SACAA FOD MANAGER</b>	<b>NAME IN BLOCKLETTERS</b>		<b>DATE</b>