

	<b>CIVIL AVIATION AUTHORITY OF MALAYSIA</b>	
<b>APPLICATION FORM FOR APPROVED TRAINING ORGANIZATION – TYPE RATING TRAINING ORGANISATION (TRTO)</b>		
APPLICATION FOR <input type="checkbox"/> TRAINING ORGANISATION / <input type="checkbox"/> TRAINING SPECIFICATIONS <input type="checkbox"/> INITIAL ISSUE* / <input type="checkbox"/> RENEWAL / <input type="checkbox"/> AMENDMENT*		
1. Operator / Training Organisation name	2. Sponsor*	
Operator and Trading Name (If any):	Name:	
Address:	Address:	
Phone: Fax:	Phone: Fax:	
Email:	Email:	
3. Principal Base of Training (*):	4. Extended/ Foreign Base of Training (*):	
Facility Name:	Facility Name:	
Address:	Address:	
Phone: Fax:	Phone: Fax:	
Email:	Email:	

5. Personnel Accepted /to be approved by CAAM* or point of contact *: Name & equivalent designation if other than describes: Name, Phone & email							
Position	Name	Phone	Email				
Accountable Manager:							
Head of Training:							
Chief Flight Simulator Instructor:							
Chief Ground Instructor:							
Quality Manager:							
Support Service Manager:							
Safety Manager (if applicable):							
Others* (with designation):							
6. Proposed Start Date:*							
7. Organisation Structure (initial COA / Change organisation):		Please attach a description of the applicant's business organisation/ structure and names and contact numbers of those entities and individuals having a major financial interest (share holder).					
8. Financial Data (initial COA):		Please attach sufficient financial data to support the financial viability of your proposal and to ensure there are adequate funds for a specified period after commencement of the operation.					
9. Comments*: TRTO /Training specifications change (brief of changes or in cover letter to amplify the detail)							
10. AIRCRAFT and/or SIMULATOR details (for initial issue TRTO / Renewal / Amendment (not submitted previously))							
No	Aircraft/Simulator manufacturer (FTD)	Make Model Series	Aircraft Reg/ Sim ID	Sim Level	MSN (if applicable)	Year Mfg	Seat
<i>Sample: Airbus/ Boeing</i>		<i>A320-214</i>	<i>AXB/2RUK</i>	<i>A-D</i>	<i>2RUK</i>	<i>2010</i>	<i>5</i>
A.							
B.							
C.							
D.							

11. Descriptions of training:		(Sample) A320	(Sample) B737	AC/SIM Type	AC/SIM Type	REMARKS	
Only filled with ( <input checked="" type="checkbox"/> ) tick mark) for the approval requested. Leave Blank <input type="checkbox"/> for not requested item							
A.	Initial Type Rating Course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
B.	Additional Type Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
D.	MCC Course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
E.	MCC Course + Type Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
F.	ATP Check / Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
G.	Proficiency / Recurrent Check	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
H.	Takeoff Landing Currency (LC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
I.	Instrument Currency (IC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
J.	PIC Right Seat Qualification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
K.	SIC Initial Qualification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
L.	SIC Recurrent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
M.	SIC Upgrading to PIC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
N.	All Weather Operations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
O.	Differences Course Initial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
P.	Differences Course Recurrent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Q.	Maintenance Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12. Other Training:		Non CBT	CBT	13. Special Operations Training:		Non CBT	CBT
A.	ATP Ground Training	<input type="checkbox"/>	<input type="checkbox"/>	A.	AWO: LVO/LVTO	<input type="checkbox"/>	<input type="checkbox"/>
B.	MCC Ground Training	<input type="checkbox"/>	<input type="checkbox"/>	B.	ETOPS/EDTO	<input type="checkbox"/>	<input type="checkbox"/>
C.	Crew Resource Management (CRM) Training	<input type="checkbox"/>	<input type="checkbox"/>	C.	HUD/ HGS	<input type="checkbox"/>	<input type="checkbox"/>
D.	Winter Operations (COLD Wx OPS)	<input type="checkbox"/>	<input type="checkbox"/>	D.	NAT-HLA	<input type="checkbox"/>	<input type="checkbox"/>
E.	FI(1) / FI(3) Course	<input type="checkbox"/>	<input type="checkbox"/>	E.	PBN/RNP/RNAV	<input type="checkbox"/>	<input type="checkbox"/>
F.	SEP	<input type="checkbox"/>	<input type="checkbox"/>	F.	RVSM	<input type="checkbox"/>	<input type="checkbox"/>
G.	Cabin Crew Training	<input type="checkbox"/>	<input type="checkbox"/>	G.	TCAS	<input type="checkbox"/>	<input type="checkbox"/>
H.	Others (if any):			H.	UPRT	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>				

Statement of Compliance: I confirm that information in this application complies with the applicable regulations			
Applicant's Name:			
Applicant's Designation:			
Submission Date:		Applicant's Signature:	
Note: See last page for filling instructions.			

**FOR CAAM USE ONLY**

FOI Name

\_\_\_\_\_

☐ ACCEPT☐ REJECT

Remarks

\_\_\_\_\_

FOI Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Application Fee:	
Receipt No:	
Cheque / P.O:	
Initial:	
Date:	

**APPLICATION GUIDE AND REQUIREMENT:****A. Application for TRTO**

1. Cover letter describing the intention such as initial renewal or amendment
2. For INITIAL ISSUE or RENEWAL of TRTO all item must be filled.
3. For TRAINING SPECIFICATIONS, only affected training or changes or additional to be filled.

**B. Initial (fill all) or Amendment (fill \*):**

1. Operator / TRTO Name \*: Attach contract / Trade license along with application of security clearances online
2. Sponsor\*: Attach Legal / contract / Board resolutions
3. Principal Base of Training (\*): attach contract with local authority / Municipality
4. Extended/ Foreign Base of Training (\*): attach contract with applicable organisation
5. Personnel Accepted (NPH Nominated Post Holder) / to be approved by the CAAM (\*): Attach contract & CV, for individual area the applicable requirement shall be attach / reflected:
  - a. Accountable Manager: Attach CV reflecting previous experience
  - b. Head of training: attach FI/DFE qualification or equivalent, CV shall contain AC type and flight hours and previous managerial experience / letter of previous employment
  - c. Chief Flight Simulator Instructor/Chief Flight Instructor: attach FI/DFE qualification or equivalent, CV shall contain AC type and flight hours and previous managerial experience / letter of previous employment
  - d. Chief Theoretical Knowledge Instructor: attach CV reflecting aircraft type or other supporting documents
  - e. Quality Manager: attach CV reflecting Quality area, Audit training and previous experience / letter of previous employment
  - f. Support Service Manager: attach CV reflecting aircraft type or other supporting documents
  - g. Safety Manager: attach CV reflecting supporting documents
6. Proposed Start Date: fill proposed starting date or expected expiry date (if renewed)
7. Organisation Structure for initial TRTO / \*Change organisation): attach a description of the applicant's business organisation contact and include individuals having a major financial interest (share holder).
8. Financial Data (\*initial/Renewal of TRTO): Please attach sufficient financial data to support the financial viability of your proposal and to ensure there are adequate funds.
9. Comments (\*): TRTO /Training specifications change (brief of changes or in cover letter to amplify the detail) Statement of Compliance: I confirm that information in this application complies with the applicable regulations.
10. Aircraft or Simulator Details:
 

AC/Simulator Manufacturer: entry only aircraft model, unless for Instrument training device, AC /SIM ID: enter Aircraft Registration or Simulator ID, SIM Level, (A to D, AG to DG, A-D Interim, etc), MSN: Manufacture Serial Number if applicable, Year of Manufacture, Number of seat (include observer seat), MCTOM: Maximum Certified Takeoff Weight / Mass, lease yes or no if the equipment is purchased.
11. Description of Training: Fill each training when applicable simulator is to be used in this training / check
12. Other training
  - a. ATPL: Training for the issuance of an ATPL

- b. MCC: Multi-crew cooperation training
- c. CRM: Crew resource management training
- d. WINTER OPS: Cold weather operations training
- e. FI(1)/FI(3)/DFE: Type Rating /Simulator Instructor / Examiner
- f. Blank: Fill in as required for other training offered that is not listed.

13. Special Operations Training:

- a. AWO (LVO / LVTO): All Weather Operations (Low Visibility Operations / Low Visibility Take Off)
- b. ETOPS/EDTO: ETOPS/EDTO Training
- c. HUD/ HGS: Head Up Display/Guidance training
- d. NAT-HLA: North Atlantic High Level Airspace Training
- e. PBN/RNP/ RNAV: Performance Based Navigation Training
- f. RVSM: Reduced Vertical Separation Minima Training
- g. TCAS : Traffic Collision Avoidance System Training
- h. UPRT: UPSET Prevention and Recovery Training

For initial approval, attach relevant Training and Procedures Manuals, Quality systems & Training schemes.

Amendment to an approved course or operations/training manual: submit applicable Training records, authorisation sheets, technical logs, lectures, study notes and briefings and any other relevant material. Have to be submitted on initial or amended additional training.