

CIVIL AVIATION AUTHORITY OF MALAYSIA

APPLICATION FORM FOR APPROVED TRAINING ORGANIZATION – TYPE RATING TRAINING ORGANISATION (TRTO)

TRAINING ORGANISATION (TRTO)						
APPLICATION FOR ☐TRAINING ORGANISATION / ☐TRAINING SPECIFICATIONS						
□INITIAL ISSUE* /□ RENEWAL / □AMENDMENT*						
Operator / Training Organisation name						
Operator and Trading Name (If any):	Name:					
Address:	Address:					
Phone:	Phone:					
Fax:	Fax:					
Email:	Email:					
3. Principal Base of Training (*):	4. Extended/ Foreign Base of Training (*):					
Facility Name:	Facility Name:					
Address:	Address:					
Phone:	Phone:					
Fax:	Fax:					
Email:	Email:					

	Personnel Accepted /to				ontact *: Na	me & equiv	alent
	Position	N	ame	Ph	one	Em	nail
Acc	countable Manager:						
He	ad of Training:						
Chief Flight Simulator							
Ch	ef Ground Instructor:						
Qu	ality Manager:						
Su	oport Service Managei	-:					
	fety Manager (if blicable):						
Oth	ners* (with designation):					
6. F	Proposed Start Date:*						
(ini	7. Organisation Structure (initial COA / Change organisation): Please attach a description of the applicant's business organisation organisation of the applicant				es and		
	Financial Data (initial	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.					
	Comments*: TRTO /Tr						er to
	AIRCRAFT and/or SII pmitted previously)	MULATOR det	ails (for initial	issue TR	TO / Renew	al / Amendr	ment (not
No	Aircraft/Simulator manufacturer (FTD)	Make Model Series	Aircraft Reg/ Sim ID	Sim Level	MSN (if applicable)	Year Mfg	Seat
Se	mple: Airbus/ Boeing	A320-214	AXB/2RUK	A-D	2RUK	2010	5
A.							
В.							
C.							
D.							

CAAM/BOP/ATO/2

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

	Statement of Com applicable regulat	ment of Compliance: I confirm that information in this application complies with the cable regulations						
	Applicant's Name	:						
	Applicant's Design	nation:						
	Submission Date:			Applicant's Signature:				
	Note: See last page for filling instructions.							
FOR	CAAM USE ONLY							
FOI	Name				Application Fee:			
		☐ ACCEPT	☐ REJECT		Receipt No:			
Rem	arks				Cheque / P.O:			
FOI	Signature				Initial:			
Date	•				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 Ground 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.