



CIVIL AVIATION AUTHORITY OF MALAYSIA

ATC LICENCE APPEAL APPLICATION

TYPES OF APPLICATION:

- Appeal on Class 3 Medical Assessment Results – ME’s Assessment.
 Appeal on Air Traffic Controller Licence Denial – Medical Case.
 Appeal on ICAO Language Proficiency Requirements (LPR) Results.
 Appeal on ATC Examination Results.

Note: This Appeal Application shall be submitted not later than 10 working days after receiving appeal application.

1. PERSONAL PARTICULARS OF APPLICANT

Name		ATC Licence No.	CAAM/ATC/L
IC No.		Station	
Permanent Address		Tel. No.	

2. TYPE OF APPEAL (As appropriate, with support documents)

2.1 Appeal on Class 3 Medical Assessment Results – ME’s Assessment

Assessment Date	M.E.	Justifications of Appeal

2.2 Appeal on Air Traffic Controller Licence Denial – Medical Case

Application Date	Justifications of Appeal

2.3 Appeal on ICAO Language Proficiency Requirements Test (LPRT) Results

Assessment Date	LPRT Venue	Justifications of Appeal

2.4 Appeal on ATC Examination Results

Examination Date	Station	Types of ATC Exam	Justifications of Appeal

Signature of Applicant:

Date:

FOR AIR NAVIGATION SERVICES AND AERODROME DIVISION

3. RESULTS OF REVIEW (As appropriate)**3.1 Appeal on Class 3 Medical Assessment Results – ME’s Assessment**

Review Panel	Decision of Appeal Panel, after a review of all evidences
	<input type="checkbox"/> No change to the earlier results. <input type="checkbox"/> Change, as follows:

3.2 Appeal on Air Traffic Controller Licence Denial – Medical Case

Review Panel	Decision of Appeal Panel, after a review of all evidences
	<input type="checkbox"/> No change to the earlier results. <input type="checkbox"/> Change, as follows:

3.3 Appeal on ICAO Language Proficiency Requirements Test (LPRT) Results

Review Panel	Decision of Appeal Panel, after a review of all evidences
	<input type="checkbox"/> No change to the earlier results. <input type="checkbox"/> Change, as follows: New ICAO LPRT Level: Next Evaluation:

3.4 Appeal on ATC Examination Results

Review Panel	Decision of Appeal Panel, after a review of all evidences
	<input type="checkbox"/> No change to the earlier results. <input type="checkbox"/> Change, as follows:

4. SIGNATURES OF REVIEW PANEL

Signature:

Name & Stamp:

Date:

FOR AIR NAVIGATION SERVICES AND AERODROME DIVISION

Date of Application Received	
Date of Review Results Notify to Applicant	
Signature & Date of Database Entry	