

CIVIL AVIATION AUTHORITY OF MALAYSIA AIR NAVIGATION SERVICES AND AERODROME DIVISION

CAAM/BPUA/ATS/02

ATS TRAINING APPROVAL APPLICATION FORM

Applicants Details		
First name:		
Last name:		
Job title:		
Organisation:		
Address:		
Talanhana		
Telephone: Email:		
Date of application:	Course Detaile	
0 (11)	Course Details	
Course title:		
Course length (days):		
Course Description (100 words):		
Target Audience (organisations, sectors, disciplines, experience):		
Target Addience (organisations, sectors, disciplines, experience).		
Method of Course Delivery (class, online, workshop, other):		



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Course Outline (Provide a list of the main topics, sections and content covered by the course):		
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Learning Outcomes (<i>Provide a list of the main learning outcomes trainee will receive</i>):		
For CAAM Use		
Date application received:		
Document review date:		
Feedback date:		
Result (Pass/Fail):		
Approval start date:		
Approval end date:		