

BAHRAIN AIR TRAFFIC CONTROLLER LICENCE APPLICATION FORM

1. Personal Details								
Title: Mr. Ms.								
Full name:								РНОТО
Date of birth:								3X4 CMS
Nationality:								(with white background
Passport No.:								& Matt finish)
CPR No.:								
Address:								
Applicant signature and date:						(cross	applicable boxes	s, date format dd/mm/yy)
2. Application Type								
Initial Application			Revalid	atio	on of License		Additional	Rating
Air Traffic Controll	er		Studen	t Li	cense			
3. Ratings Applied F	or							
(ADC) Aerodrome	(APP) Approach Control Procedural							
(APS) Approach Control Surveillance		(ACP) Area Control Procedural						
(ACS) Area Control			(ATA) A	TC	Assistant			
4. Endorsement Ap			(I CE) I a		I Compatancy Evans	inor		
(OJTI) On-the-job T	(LCE) Local Competency Examiner (ATSI) Air Traffic Services Instructor							
(EXIVI) ATC EXAMINI	CI		(7.131) 7	111	Traine Services macr	actor		
5. ATC Licence Infor								
Bahrain ATC License Number:								
Bahrain License Date o								
Bahrain Licence Date of Expiry:								
Other ATC License (Or	igin & Number):							
Ratings Already Held:								
ELP Level:								
Medical Expiry:								
Medical Limitations/Conditions:								
Unit:								
Date of Training Commencement:								
6. Documents required to be submitted to support this application:								
2 Passport photos - Electronic photos are accepted in high resolution ATC License or relevant ICAO training course								
Passport and CPR					Certificate of Con	npeten	ce	
English Language				Medical Certificat	te Class	3		
Employment requirement								

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The above documents have been reviewed and meet the requirements of CAR003 for the issuance the requested qualification (copies attached):						
7. For Official Use Only						
Declaration: The applicant's details and documentation provided have been verified and meet the requirements as stipulated in CAR003, and is recommended for the issuance of the requested qualification.						
HATC or Designate		Sign		Date		
BCAA ASSD Review:						
DASS or Designate		Sign:		Date:		
BCAA ALD Final Review/ Approval						
CAL	Recommended / Not Recommended	Sign:		Date:		
	Approved/ Not Approved					
DAL	Recommended / Not Recommended (For Issue of Initial License)	Sign:		Date:		

Approval of USCA (For Issue of Initial License)							
USCA Approval	Approved/ Not Approved	Sign:		Date:			

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