

File No.....

**APPLICATION FOR THE ISSUE/ CONVERSION OF COMMERCIAL PILOT'S LICENCE (AEROPLANE) with  
INSTRUMENT RATING / without INSTRUMENT RATING**

(Strike off whichever not applicable from subject & please see the instructions also)

1.	Name <i>(as in 10<sup>th</sup> certificate)</i>		Affix self attested recent photograph of size 3 x 4 cm  (also enclose at least 5 photographs with form)   (signature of candidate)
	Father's Name		
	Mother's Name		
2.	Date of birth & Age <i>(as in 10<sup>th</sup> certificate)</i>		
3.	Place of birth		
4.	Country of birth		
5.	Nationality		
6.	(a) Correspondence address		
	(b) Email Id		
7.	Permanent address		

8. Educational Qualification:

	Examination	Name of Board/ university	Year	Subjects offered(write name of subjects)	Remarks
(i)	Class X or equivalent				
(ii)	Class XII or equivalent				
(iii)	Any other				

10<sup>th</sup> & 12<sup>th</sup> shall be from recognized Board/ University. 12<sup>th</sup> shall have Physics and Maths. For recognition and equivalency please check from Association of Indian Universities.

9. Knowledge: (Computer Number - .....

	Paper	Passed in Session	Roll No.	Date of Result	Valid upto	Remarks
a)	Air Regulation					
b)	Air Navigation					
c)	Aviation Meteorology					
d)	Air Navigation Composite <small>(in lieu of b) &amp; c) if applied for conversion)</small>					
e)	Technical General <small>(not required, if applied for conversion)</small>					
f)	Technical Specific <small>(from contracting state, if applied for conversion)</small>					
	(i) A/c Name.....					
	(ii) A/c Name.....					
	(iii) A/c Name.....					
	(iv) A/c Name.....					
g)	Signal reception test @ 6/8 w.p.m.	Passed	Yes/ No			

In case of conversion of foreign license, Technical Specific result in respect of the aircrafts shall be given from the contracting State. Holder of Valid Indian CHPL Required to submit result of Technical General and Technical Specific only. Ref FCL 2 of 2009.

10.	RTR and FRTOL details	Number	Date of issue	Valid upto	Whether applied for FRTOL	Remarks
	Details of RTR(A)/RTR(P)					
	FRTOL License				Yes/ No	



13. Skill in preceding six months as required vide Section J from date of application in DGCA:

a)	Requirement	A/c Name	duration	Date of test	Valid upto	Remarks
(i)	general flying test by day					
(ii)	general flying test by night					
(iii)	250NM, X-country flight test by Day (with one full stop landing elsewhere)					
(iv)	120NM, X-country test by Night (without landing elsewhere)					
(v)	IR Test (if IR requested)					

Note: - All the skill tests, cross country tests & instrument rating test shall be submitted in DGCA approved Proforma. Each test reports shall be duly signed by the DGCA approved (state approved) examiner and shall be submitted in original. (DGCA approved Proformas are available on DGCA website under tab-forms). All the above tests i.e. 13. a) (i), (ii), (iii) & (iv) shall be on the same aircraft type. All the flying tests shall have been conducted only after the date of passing of DGCA / contracting state's exam on that aircraft type.

For additional aircraft ratings (A/c Name..... attach A/c specific result & give details in 9 above)

b)	Requirement	Duration	Date of Test	Valid upto	Remarks
(i)	general flying test by day				
(ii)	general flying test by night				
(iii)	IR Test (if IR requested)				

For additional aircraft ratings (A/c Name..... attach A/c specific result & give details in 9 above)

c)	Requirement	Duration	Date of Test	Valid upto	
(i)	general flying test by day				
(ii)	general flying test by night				
(iii)	IR Test (if IR requested)				

For additional aircraft ratings (A/c Name..... attach A/c specific result & give details in 9 above)

d)	Requirement	Duration	Date of Test	Valid upto	
(i)	general flying test by day				
(ii)	general flying test by night				
(iii)	IR Test (if IR requested)				

14.	Have you submitted Flying Training Progress Report (FTPR) duly signed by CFI. Flying Training shall have been completed in accordance with the syllabus prescribed by the Director-General (not applicable for conversion)	Yes/ No	
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15.	Were you been involved in aircraft accident/ incident in preceding 5 years	Yes/ No	
	If yes, give details thereof; with the disciplinary action taken, if any:-		

16.	If, holding any Indian flight crew license please give details			
	Name & number of licence	Date of issue	Valid upto	

17.	Fee Details: (Ref rule 48 for fee amount.)		
	Bharatkosh Trans. Ref.No.	Date	Amount

18. For defence personnel only:

	Condition	Complied	
i)	Whether the applicant is/ was in the service of Defence Forces of India.	Yes/ No	
ii)	If serving, No Objection Certificate obtained from the concerned Hqrs.	Yes/ No	
iii)	If serving, indicate whether accident/incident free certificate for the preceding 5 years has been obtained from the concerned Hqrs.	Yes/ No	
iv)	If not serving, indicate the Force..... and date of release.....		

19. If application is for conversion of foreign license and rating, please give following details also:-

a)	Details of foreign license		
	i) Country of issue of CPL		
	ii) Foreign CPL Number		
	iii) Date of issue of foreign CPL		
	iv) Validity of foreign CPL		
	v) Aircraft ratings on foreign CPL		
	vi) Instrument Rating on CPL		

b)	Details of foreign medical		
	i) Class & Date of foreign medical	Class-....., date of foreign Medical.....	
	ii) Validity of foreign medical	Valid upto.....	

c)	Have you enclosed the verification of foreign license and medical from the contracting state's regulatory authority	Yes/ No	

d)	Name, address, website & e-mail ID of the contracting state's flying training institute from where you did training		

e)	Details of passport & travel for flying training (enclose copy of all the pages)		
	i) Full Name on Passport:		
	ii) Passport Number:		
	iii) place of Issue:		
	iv) valid upto:		

f)	Foreign Travel periods for flying training purposes:			
	Country visited for flying training	Departed India (date)	Arrived India(date)	

20. Any other information:

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Declaration by the Applicant

I declare that in terms of provisions of Rule 39A of the Aircraft Rules,1937, I have not suppressed or given any wrong information herein above for the purpose of obtaining the licence/ rating applied for here. I understand that I am liable for appropriate action, if any information given by me is found to be wrong even at a later date.

Place:

Date:

Signature of the applicant

21. List of documents to be submitted:

<b>List of the documents to be submitted with application form</b>	
<b>For Educational Qualification</b>	
1.	Photo Copy of 10 <sup>th</sup> Marks sheet and certificate or Birth Certificate
2.	Original and Self-Attested Copy of 10 <sup>th</sup> Marks sheet and certificate
3.	Verification of 10 <sup>th</sup> certificate from the concerned recognised board/ university, if not submitted with CEO
4.	Original and Self-Attested Attested Copy of 12 <sup>th</sup> Marks sheet and certificate
5.	Verification of 12 <sup>th</sup> certificate from the concerned board/ university, if not submitted with CEO/Equivalence Certificate where applicable
<b>For Medical Fitness</b>	
6.	Self-attested Valid Class-I medical Assessment.
<b>For Knowledge</b>	
7.	Result of passing Air Regulation exam
8.	Result of passing Air Navigation exam
9.	Result of passing Aviation Meteorology exam
10.	Result of passing Air Navigation Composite exam {in lieu of Air Navigation & Aviation Meteorology if applied for conversion}
11.	Result of passing Technical General exam {not required, if applied for conversion}
12.	Result of passing Technical Specific exam {from contracting state, if applied for conversion}{Submit for each aircraft to be required on license)
	(a) A/C Name.....
	(b) A/C Name.....
	(c) A/C Name.....
	(d) A/C Name.....
13.	Passed result of signal reception test @ 6/8 w.p.m.
14.	English Language Proficiency (ELP) Test Certificate
15.	FRTOL (R)/FRTOL If applicable
16.	Original SPL, if not already submitted
17.	CHPL in case of Helicopter flying experience is to be considered
<b>For Flying Experience</b>	
18.	Duly certified log book in Original
19.	Duly certified FTPR from FTO
20.	RTR(A) License or Result of RTR(A) exam (if passed recently) (but RTR(A) license is must before issue of flight crew license, please give a copy of license)
21.	CA39 duly certified by the CFI of the FTO for preceding five years. (Self-certified in case of conversion cases)
22.	CA39 duly certified by the CFI of the FTO for preceding six months
23.	Statement of PIC X-country duly certified
24.	Statement of Instrument Time on aircraft duly certified
25.	Statement of Instrument Time on simulator (Synthetic) duly certified
26.	Statement of 300 NM PIC X-country with name of two full stop landings at different aerodromes duly certified
27.	Statement of 5 hrs PIC and 10 Take Off- Landings by night (in preceding 6 months) duly certified
28.	Statement of at least 15 Hours PIC (in preceding 6 months) duly certified
29.	Accident/Incident certificate, if any

<b>Skill Tests (Preceding 6 months)(In case of foreign conversion – tests conducted in India)</b>	
30.	Pro forma of General Flying Test by Day
31.	Pro forma of General Flying Test by Night
32.	Pro forma of 250NM, X-country flight test by Day
33.	Pro forma of 120NM, X-country test by Night
34.	Report of IR Test (if IR requested)
<b>Additional documents for Conversion of License</b>	
35.	Foreign License in Original and Copy
36.	Valid foreign medical assessment in original and Copy
37.	Approval of the Flying School from the state regulatory authority, where applicable. (In case of flying undertaken after issue of license or in case of license issued for flying experience less than 200 hrs.)
38.	Accident/Incident if any
39.	Full copy of Passport
40.	Details of verification request, if applicable
<b>For Defence Personnel only</b>	
41.	<b>For Serving Defence Personnel</b>
	NOC from concerned headquarters
	Accident/Incident free certificate for preceding five years from concerned headquarters
<b>For Non Serving/Retired Defence Personnel</b>	
42.	Release Certificate
<b>General Requirements</b>	
43.	Five Photographs with name imprinted
44.	Fees as per Rule 48
45.	A proper self-addressed cloth line envelope affixed with requisite postal stamps (As per distance and weight)
46.	If you hold any other license issued by DGCA, please submit a copy.
47.	Verification of character and antecedents of the trainee from the concerned government agency.

- Note:**
1. All photocopies of documents submitted to be self-attested.
  2. Email id of applicant and Mode of receipt of license, (in case of in person) to be clearly indicated.

## INSTRUCTIONS TO THE APPLICANTS

1. This application, duly filled may be submitted personally OR through an authorized person OR by registered post to Director Training & Licensing, Directorate General of Civil Aviation, Technical Centre, Opp. Safdarjang Airport, Aurbindo Marg, New Delhi 110003.

*All the documents submitted by the applicant shall be serially numbered starting from serial no.1. The serial no. of the documents shall be specified in Para 21 of application form. (21. Please tick the list of enclosures submitted)*

2. The date of application is the date at which the application is received in DGCA. Therefore, applicant shall ensure his application reaches in time at DGCA.
3. All the calculations of the validity of preceding 5 years or preceding 6 months are based on the date of application in DGCA and applicant shall possess all the requisite documents including medical, DGCA written exam results, RTR(A) on the date of submission of papers in DGCA, else application would be summarily rejected. Please refer flight crew circular 2 of 2009 also.
4. The sample CA-39 forms for 5 years and for 6 months are available with this form.
5. In case of foreign national, enclose nationality certificate OR attested copy of passport.
6. Log book shall be maintained as per rule 67 and there shall be no cuttings. The entries of the skill tests/ X-country tests/ IR tests shall be duly certified in the log book by the examiner who conducted the check. The number of landings carried out during the tests shall be clearly mentioned in the log book.
7. In case of application for conversion of foreign license applicants are required to submit copy of the log book containing flying of at least preceding six months.
8. All the skill tests shall be conducted only after the candidate had passed the written examination for that type of aircraft.
9. The photograph shall be identical, recent, coloured, size 3cmx 4cm showing frontal view of full face and having name printed on them. The name shall be the same as in 10<sup>th</sup> certificate.
10. If, any person has changed his name than what appears on his 10<sup>th</sup> certificate, he shall submit all the relevant certificates and documents required by law in support of change in name.
11. In case, conversion is sought in respect of license of the Contracting State who do not conduct technical specific examination for each aircraft and foreign license is for all single and multi-engine below 5700kgs, then on Indian CPL only one single and one multi engine aircraft rating (for which he has submitted skill test reports) will be granted. Further, extension of ratings would be done as per the provisions of Schedule-II, Section-J.
12. All the originals shall be kept in a separate envelope and remaining documents should be separately kept and they should be marked as annexure as per the serial number given in the list of enclosures.
13. Remarks column is for office use only
14. The applicant is required to submit the application along with a proper self-addressed cloth line envelope affixed with requisite postal stamps (as per distance and weight).

**SIGNALRECEPTIONTESTCERTIFICATE**

TO WHOM IT MAY CONCERN

The Wireless Telegraphy (Morse code) Competency Test in reception for 6/8 w.p.m. and in transmission for 6/8 w.p.m. was carried out of Mr./Mrs \_\_\_\_\_ Holder of

**RTR (A)/SPL (A) No.** \_\_\_\_\_ valid upto \_\_\_\_\_ as per DGCA Flying Training Circular No. 2/94 Dated 15.05.1994 for the issue of Commercial Pilot's License / Instrument Rating and was declared **PASS/FAIL.**

Date of Test:

**Place:** \_\_\_\_\_

**Date :** \_\_\_\_\_

Chief Flight Instructor /  
Dy. Chief Flight Instructor /Examiner



**STATEMENT OF PIC CROSS COUNTRY**

Date:

List of Solo (as PIC) Cross Countries in respect of \_\_\_\_\_ holder of  
SPL No. \_\_\_\_\_ to a distance beyond a Radius of 100 N.M. from the  
aerodrome of departure for the fulfilment of Cross Country requirement

S.No	DATE	A/C TYPE	REG. OF A/C	FROM	TO	ROUTE OVERFLYING/ LANDING POINT BEYOND 100 NM RADIUS	DEP. TIME	ARR. TIME	DURATION	DISTANCE IN NM
1										
2										
3										
4										
5										
6										
7										
8										
TOTAL:										

**Chief Flying Instructor/  
Dy Chief Flight Instructor**

**STATEMENT OF INSTRUMENT TIME ON AIRCRAFT**

Date: \_\_\_\_\_

Statement of Instrument Time on aircraft in respect of \_\_\_\_\_

SPL No. \_\_\_\_\_ valid up to \_\_\_\_\_

S.No	DATE	A/C TYPE	REG. OF A/C	FROM	TO	DEP. TIME	ARR. TIME	TIME TAKEN	INSTRUMENT TIME	REMARKS
1										
2										
3										
4										
5										
6										
7										
8										
TOTAL:										

**Chief Flight Instructor/  
Dy. Chief Flight Instructor**

**STATEMENT OF INSTRUMENT TIME ON SIMULATOR**

Date:

Statement of Instrument Time Simulator (Synthetic) in respect of \_\_\_\_\_

SPL No. \_\_\_\_\_ valid up to \_\_\_\_\_

S. No.	DATE	TYPE OF SIMULATOR	EXCERCISE	INSTRUMENT TIME
Total:				

**Chief Flight Instructor /**

**Dy. Chief Flight Instructor /Examiner**

**300 NMS CROSS COUNTRY**  
**CERTIFICATE OF 300 NMS CROSS-COUNTRY FLIGHT TEST FOR ISSUE OF CPL**

This is certify that Mr./Ms. \_\_\_\_\_ Pilot Trainee of \_\_\_\_\_, has carried out the 300 NM Cross Country Flight on \_\_\_\_\_ (Aircraft Type) VT-\_\_\_\_\_ in accordance with Section J, Schedule II, Aircraft Rules 1937 for issue of CPL. Details of the flight are as mentioned below :-

Departure from \_\_\_\_\_ at \_\_\_\_\_ Arrival at \_\_\_\_\_ at \_\_\_\_\_ Distance \_\_\_\_\_  
(Place) (Time) (Place) (Time)

Departure from \_\_\_\_\_ at \_\_\_\_\_ Arrival at \_\_\_\_\_ at \_\_\_\_\_ Distance \_\_\_\_\_  
(Place) (Time) (Place) (Time)

Departure from \_\_\_\_\_ at \_\_\_\_\_ Arrival at \_\_\_\_\_ at \_\_\_\_\_ Distance \_\_\_\_\_  
(Place) (Time) (Place) (Time)

Note: Indicate O/F Points wherever applicable

Date \_\_\_\_\_

Place \_\_\_\_\_

Pilot under Check  
(Sign Below)

Chief Flight Instructor/  
Dy. Chief Flight Instructor /Examiner

**Statement of PIC and Take off-Landings by night (in preceding 6 months) in respect of**  
**\_\_\_\_\_ SPL No. \_\_\_\_\_ Valid up to \_\_\_\_\_**

Date:

S.No	DATE	TYPE	REG	FROM	TO	DEP TIME	ARRIVAL TIME	DURATION	NO.OF TAKE OFF - LANDINGS

**TOTAL TIME:**

**TOTAL NUMBER OF TAKE OFF - LANDINGS:**

**Chief Flight Instructor /**

**Dy. Chief Flight Instructor /Examiner**

**Statement of PIC of at least 15 Hours (in preceding 6 months) in respect  
of \_\_\_\_\_ SPL No. \_\_\_\_\_ Valid up to \_\_\_\_\_**

Date:

S.No	DATE	TYPE	REG	FROM	TO	DEP TIME	ARRIVAL TIME	DURATION	NO.OF TAKE OFF - LANDINGS

**TOTAL TIME:**

**TOTAL NUMBER OF TAKE OFF - LANDINGS:**

**Chief Flight Instructor /**

**Dy. Chief Flight Instructor**

## PERFORMA FOR 120NM CROSS – COUNTRY FLYING TEST BY NIGHT FOR ISSUE OF COMMERCIAL PILOT’S LICENCE

This is to certify that Mr./Ms. \_\_\_\_\_ holder of Student/Private Pilot’s license No. \_\_\_\_\_ of \_\_\_\_\_ FTO with

Examiner \_\_\_\_\_ has carried out the prescribed Cross Country test by night on \_\_\_\_\_ (Type of Aircraft) VT-\_\_\_\_\_ (with Marking) On \_\_\_\_\_ (date) for issue of Commercial Pilot’s License, the distance being \_\_\_\_\_ (Not less than 120 NM).

1.	A) Preparation – ATC Clearance met briefing	
	B) Navigation Log	
	C) Computer, Protector, allied equipment maps, etc.	
2.	Map reading	
3.	Calculation of ground speed and ETA reporting point / destination	
4.	Drift calculation	
5.	Selection of fuel tanks / transfer from aux. to main etc.	
6.	General flying enroute (Steering course / maintaining height & Speed	
7.	Approach at destination for landing	
8.	Landing	
9.	Recognize and manage threats and errors	
10.	General remarks and assessment	

Timings of the Flight are:

Departure from: \_\_\_\_\_ : \_\_\_\_\_ IST

Arrival at: \_\_\_\_\_ : \_\_\_\_\_ IST

Note: Indicate O/F Points wherever applicable

Date: \_\_\_\_\_

Place: \_\_\_\_\_

(Signature)  
Pilot under check

Signature of Examiner

Chief Flight Instructor/  
Dy. Chief Flight Instructor

## PERFORMA FOR 250NM CROSS – COUNTRY FLYING TEST BY DAY FOR ISSUE OF COMMERCIAL PILOT’S LICENCE

This is to certify that \_\_\_\_\_ holder of S.P.L. No.: \_\_\_\_\_ has carried out the prescribed cross – country test by day with Examiner \_\_\_\_\_ on \_\_\_\_\_, VT-\_\_\_\_\_ on \_\_\_\_\_(date) for issue of Commercial Pilot’s License, the distance being \_\_\_\_\_N.M. (Not less than 250 N.M.)

He/She has carried out this flying satisfactory with one full stop landing at \_\_\_\_\_ aerodrome on the route.

1.	A) Preparation – ATC Clearance met briefing	
	B) Navigation Log	
	C) Computer, Protector, allied equipment maps, etc.	
2.	Map reading	
3.	Calculation of ground speed and ETA reporting point / destination	
4.	Drift calculation	
5.	Selection of fuel tanks / transfer from aux. to main etc.	
6.	General flying enroute (Steering course / maintaining height & Speed	
7.	Approach at destination for landing	
8.	Landing	
9.	Precaution during refueling en-route, if applicable	
10.	Recognize and manage threats and errors	
11.	General remarks and assessment	

The timings of the flight are:-

Departure from : \_\_\_\_\_ at \_\_\_\_\_ IST

Arrival at : \_\_\_\_\_ at \_\_\_\_\_ IST

Departure from : \_\_\_\_\_ at \_\_\_\_\_ IST

Arrival at : \_\_\_\_\_ at \_\_\_\_\_ IST

Note: Indicate O/F Points wherever applicable

Date: \_\_\_\_\_

Place: \_\_\_\_\_

(Signature)  
Pilot under check

Signature of Examiner

Chief Flight Instructor / Dy.  
Chief Flight Instructor



EXPERIENCE IN LAST 5 YEARS FROM THE DATE OF SUBMISSION OF PAPERS IN DGCA  
(FROM ..... TO .....)

Name of Licence Holder.....

Licence Class :..... License Number ... Valid upto.....

Aircrafts flown.....

Year Wise - flying Details preceding 5 years

Year Wise ↓	SINGLE ENGINE AIRCRAFT					MULTI ENGINE AIRCRAFT					INSTRUMENT TIME			
	DAY		NIGHT			DAY			NIGHT		Total	On Aircraft		On Synthetic Simulator
	Dual	Solo	Dual	Solo	U/T	Co-pilot	PIC	U/T	Co-pilot	PIC		Simulated	Actual	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	
Total														

Aircraft Wise - flying Details preceding 5 years

A/c Wise Pl. Put a/c Name ↓	SINGLE ENGINE AIRCRAFT					MULTI ENGINE AIRCRAFT					INSTRUMENT TIME			
	DAY		NIGHT			DAY			NIGHT		Total	On Aircraft		On Synthetic Simulator
	Dual	Solo	Dual	Solo	U/T	Co-pilot	PIC	U/T	Co-pilot	PIC		Simulated	Actual	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	
Total														

This is to certify that I have examined the logbooks of Mr. ....  
and the above is a true summary.

Countersigned.....  
Name.....  
Designation.....  
Company name.....  
Seal.....  
Date.....

Signature of License Holder .....  
Date.....

