



**APPLICATION FOR TEMPORARY APPROVAL OF A TRI/SFI COURSE**

**NOTE:**

- 1 This form should be used only to apply for Temporary TRI/SFI Course Approval.
- 2 Where a Full (3 year) SFI/TRI Course Approval is required, Form SR1823 should be used.
- 3 No progress will be made with the application if the full fee and proposed course manual is not enclosed.

Company Name:	
Company address:	
E-mail Address	

✓	COURSE TYPE		
	TRI Type Specific Course (Aircraft only)	Aircraft type	
	SFI/TRI Type Specific Course (Simulator only)	Simulator code(s)	
	TRI Type Specific Course (Simulator to Aircraft "Upgrade") (Aircraft to Simulator "Upgrade") (delete and appropriate)	Aircraft type	
		Simulator code(s)	

<b>DETAILS OF TUTOR NOMINATED TO CONDUCT TRI/SFI COURSE</b>	
<b>The Tutor must have an ATPL which is in all respects valid (including type rating, TRI Rating: on the aircraft type to which this course relates) Copies of Ratings must be included with application.</b>	
Full Name:	Pilot's Licence No:
E-mail address:	

<b>DETAILS OF APPLICANT FOR TRI/SFI TRAINING</b>	
<b>Applicants must satisfy the experience requirements specified in JAR-FCL, and either have a valid Core Course Certificate or meet the exemption criteria specified in Aeronautical Information Circulars.</b>	
Full Name (block capitals):	Pilot's Licence No:
Date of birth (dd/mm/yyyy): ..... Town and Country of Birth: .....	
Nationality: .....	
Telephone Number(s):	Email:

<b>1. DECLARATION</b>
I declare that the information on this form is correct.
Applicants Signature ..... Name (block capitals) ..... Date .....
Position in Company .....
It is an offence to make, with intent to deceive, any false representations for the purpose of procuring the grant, issue, renewal or variation of any certificate, licence, approval, permission or other document. Persons doing so render themselves liable and subject to prosecution under the current applicable regulations.

## 2. SUBMISSION INSTRUCTIONS

In accordance with the SCAA Scheme of Charges "Authorisation and Approval of Persons" as contained in the Air Navigation Order.

This completed form must be forwarded together with Payment form SR1187 without delay to:

[morr@scaa.sc](mailto:morr@scaa.sc)

or faxed to +248 384 033

or posted to Flight Operations Inspectorate  
Safety Regulation  
Seychelles Civil Aviation Authority  
P.O Box 181  
Victoria, Mahe  
Seychelles

**Please note that failure to submit all of the required documentation may lead to a delay in processing your application.**