



CIVIL AVIATION AUTHORITY OF SRI LANKA

Details of Nominated Person

- Duly completed Original of this CAASL Form 4 should be submitted to the DGCA
- This form shall be printed on a single paper (both side).
- If you are filling this form by hand, write neatly with a black or blue ballpoint pen.
- Questions containing check boxes shall be marked with tick (✓) where appropriate.

Details of Nominated Person required to be accepted as specified in:

Please tick appropriate box

☐ IS-M ☐ IS-145 ☐ IS-147 ☐ Other(specify)

1. Name of Organization :

2. CAASL Approval No :

3. Name of the Nominated Person :

(As per NIC or Passport)

4. Address of the Nominated Person :

5. Date of Birth

dd / mm / yy

6. Gender

Male

Female

7. National ID/
Passport no

8. Nationality

9. License No (if any)

10. Telephone No : 11. Email Address :

12. Nominated Post :

13. Qualifications relevant to the Nominated Position(attach a separate page if required)

14. Work Experience relevant to the Nominated Position (attach a separate page if required)

15. Other Nominated Form 4 positions currently and previously held by the applicant (if any, include name and approval number(s) of Organization):

16. Has any action been taken or in the process of being taken against you by DGCA of Sri Lanka or any other State Civil Aviation Authority	Yes	No
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17. Have you ever been refused the issue of CAASL license or post holder approval previously	Yes	No
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18. Have you ever been convicted for any offence and found guilty	Yes	No
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If you answered yes to above no 16,17 or 18 please provide details about dates, actions, charges, convictions and imprisonment in Sri Lanka or overseas (attach a separate page if required)

19. The following evidences are attached to support the application ;		
Request letter from the Organization	Yes	No
Qualification of Nominated person	Yes	No
Work Experience (Service Letter) of the Nominated person	Yes	No
Resignation acceptance by previous employer (if applicable)	Yes	No
Copy of a National Identity Card (NIC) or passport (bio data page only)	Yes	No
Appointment Letter issued by the Organization	Yes	No
Job Description	Yes	No
CAASL or other state CAA approval held by the nominated person, if any	Yes	No
Training : <i>Human Factor</i> <i>Legislation</i> <i>Company Procedure</i> <i>SMS</i>	Yes	No
Curriculum Vitae	Yes	No
20. Applicant's(Nominated Person) Declaration I declare that I meet the requirements, qualifications, knowledge and experience as details in the applicable regulation and I have sufficient capacity to complete this role as described in the duties & responsibilities as described in the CAASL approved manuals and the CAASL regulations. <div style="display: flex; justify-content: space-between;"> <div>Signature :</div> <div>Date : dd/mm/yy</div> </div>		
21. Accountable Manager/Head of the Organization Declaration I declare that the above-named person nominated as a Post holder within my Organization has been found to be competent and trustworthy to carry out the role in accordance with the duties & responsibilities as described in the CAASL approved manuals and the CAASL regulations. <div style="display: flex; justify-content: space-between;"> <div>Signature :</div> <div>Date : dd/mm/yy</div> </div>		
Note - Declaration of false information is an Offence under section 100 of Civil Aviation Act No. 14 of 2010. The Offence is punishable on conviction by a fine and or up to two years imprisonment.		
CAASL USE ONLY		
The Nominated post holder will be issued a completed CAASL Form 4 signed by DGCA or his delegate as accepting the nominee upon the result and recommendation of the assessment panel appointed by the DGCA.		
Recommendation :	Recommended	Not Recommended
..... Name Date Sectional/Divisional Head Signature
Nominated Post Holder :	Accepted	Not Accepted
..... Name Stamp DGCA Signature
Date :		