



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
<p>20. Applicant's(Nominated Person) Declaration</p> <p>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 &amp; responsibilities as described in the CAASL approved manuals and the CAASL regulations.</p> <p>Signature : _____ Date : dd/mm/yy</p>		
<p>21. Accountable Manager/Head of the Organization Declaration</p> <p>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 &amp; responsibilities as described in the CAASL approved manuals and the CAASL regulations.</p> <p>Signature : _____ Date : dd/mm/yy</p>		
<p><b>Note</b> - 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.</p>		
<p><b>CAASL USE ONLY</b></p>		
<p>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.</p>		
Recommendation :	Recommended	Not Recommended
..... Name	..... Date	..... Sectional/Divisional Head Signature
Nominated Post Holder :	Accepted	Not Accepted
..... Name	..... Stamp	..... DGCA Signature
Date : .....		