



CIVIL AVIATION AUTHORITY OF SRI LANKA
APPLICATION FOR THE ISSUANCE OF ATC RATINGS

I. Rating to be issued

Aerodrome Control Rating	Approach Control procedural Rating -	Area Control Procedural Rating	Approach Control Surveillance -Rating	Area Control Surveillance -Rating	Area Control Surveillance -ADS Rating
Katunayake <input type="checkbox"/>	Katunayake <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ratmalana <input type="checkbox"/>	Mattala <input type="checkbox"/>				
Mattala <input type="checkbox"/>					
Batticaloa <input type="checkbox"/>					
Jaffna <input type="checkbox"/>					

(tick appropriate box)

II. Personal Particulars

1. Name in full:

 (Block letters, Surname first)
2. Telephone No.:.....
3. E-mail Address.....
4. Licensing System Application File No:
5. Licence No:...ATC/.....
6. i. The last date of Medical Examination:
 ii. The validity of ATC Licence :
 iii. The level of ELPC & Expiry date if any:

III. Training Details

7. Theoretical Training

Title of the course /Details of the course	Country/ venue	Date of commencement	Date of completion

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8. On-the-job Training

OJT training & Name of the instructors	OJT centre	Date of commencement	Date of completion	Signature of OJT Instructors

9. Attached following documents

- I. Certified copy of the course completion certificate
- II. Details of the training course (Subjects followed, venue , duration)
- III. Receipt of the payment

I hereby confirm that the above particulars and documents given by me are true and correct.

.....
Date

.....
Signature of Applicant

I certify that the entries in 7-9 are correct.

.....
Date

.....
Signature of Head of Air Navigation
Services & Stamp

.....
Delivery Date

.....
Delivery Time