



CIVIL AVIATION AUTHORITY OF SRI LANKA

APPLICATION FOR RE-ACTIVATION OF LAPSED LICENCE

- PRIVATE PILOT LICENCE (HELICOPTERT)**
- COMMERCIAL PILOT LICENCE (HELICOPTER)**
- COMMERCIAL PILOT LICENCE/IR (HELICOPTER)**
- AIRLINE TRANSPORT PILOT LICENCE (HELICOPTER)**

1. (a) Full Name :.....
 (Please complete this in BLOCK LETTERS)

(b) Name with initials:

2. Permanent Address:.....

3. Telephone No.: 4. Fax No.....

5. Email Address:

6. Nationality: 7. Date of Birth: D.....M.....Y.....

8. ID/Passport No :.....

9. (a) Licence No. / Type of Licence applied for:

(b) Last date of validity:

10. a). Subjects applied for PPL (A)

No	Subjects	Date	Time	Remarks
1	Air Law & Operational Procedures			
2	Human Performance & Limitations			

b).Subjects applied for CPL (A)/ CPL-IR (A)/ ATPL (A)

No	Subjects	Date	Time	Remarks
1	Air Law & Operational Procedures			
2	Composite Paper Human Performance & Limitations Meteorology General Navigation Radio Navigation			

12. (a) Is this your first attempt Yes No

(b) If “No”, the dates of First attempt:

13. Subjects passed in first and other attempts:

No	Subjects	Attempt No	Year & Month
1			
2			

14. Flying Experience :

	Dual	Solo
(a) Hours claimed as Pilot of Aeroplanes
(b) Night Flying
(C) Cross Country
(d) Instrument Time

15. Type of Aircraft :

I certify that the above particulars furnished by me are true and accurate to the best of my knowledge.

.....

Date

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Signature of the candidate

Note : Please attach the course completion certificate