

ATCO-Licence - Issue/Revalidation/Renewal

Application for issue/revalidation/renewal of an air traffic controllers' licence (ATCO-licence) according to Commission Regulation (EU) 2015/340

Please fill in the framed fields of the form, sign it and send it together with attachments to:

AUSTRO CONTROL GmbH, Aviation Agency, Schnirchgasse 17, 1030 Vienna, Austria

1 Type of application

Application for:

	Issue	Revalidation	Renewal	Amendment (see no. 6)
<input type="checkbox"/> Student air traffic controller licence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Air traffic controller licence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Endorsement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Unit endorsement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> OJTI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Assessor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> STDI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> German <input type="checkbox"/> L4 <input type="checkbox"/> L5 <input type="checkbox"/> L6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> English <input type="checkbox"/> L4 <input type="checkbox"/> L5 <input type="checkbox"/> L6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

2 Applicant

Licence number:

ATC-organisation:

Title First Name Last Name Initials

Street Postal Place Country

Date of Birth Place of Birth Citizenship

Place Date Signature of Applicant

I hereby confirm that all information given is correct and that the student air traffic controller licence/the air traffic controller licence has not been revoked in any other (EU-member) state.

3 Rating(s)/Endorsement(s)

- ADV

- ADI AIR GMC TWR GMS RAD

- APP

- APS PAR SRA TCL

- ACP OCN

- ACS TCL OCN

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4 Unit endorsement(s)

Rating/Endorsment/Sector/Position (abbreviation)	ICAO Location Indicator	Rating/Endorsment/Sector/Position (abbreviation)	ICAO Location Indicator

5 Confirmation by the authorised representative (training organisation)

Issue / Renewal of the cited unit endorsement was made according to the specifications of the UTP version:

Receipt of the cited unit endorsement was made according to the specifications of the UCS version:

The last assessment of competence according to Commission Regulation (EU) 2015/340 Annex I (Part-ATCO) ATCO.B.025 occurred

on by (name, licence number)

in theory

in practice

First Name Last Name

Place Date Signature of authorised representative (training organisation)

6 Remarks / Amendment (see no. 1)

Please specify in the following field details regarding the desired change (e.g. change of name or address, duplicate request, restriction of endorsement etc.):