

JABATAN PENERBANGAN AWAM MALAYSIA
DEPARTMENT OF CIVIL AVIATION MALAYSIA (DCA)

No. 017961

APPLICATION FOR RENEWAL OF A PROFESSIONAL PILOT'S LICENCE

FOR OFFICIAL USE ONLY
Fee Payable:
Receipt No.:
Date:
Signature:

Note: Please tick as required.

ATPL

CPL

FEL

SECTION I: PERSONAL PARTICULARS OF APPLICANT

Full Name:	Date of Birth								
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Postal Address:

NRIC/Passport No.:	Nationality:
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Name of Employer:

SECTION II: PARTICULARS OF PILOT'S LICENCE

Type of Pilot's Licence *ATPL/CPL/FEL	Licence No.:	Licence Expiry Date:							
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Date of recent medical examination					
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Name of medical examiner:

SECTION III: DATE OF LAST SUCCESSFUL CERTIFICATE OF TEST

(A) AIRCRAFT RATING

Aircraft Type/Sim:	DATE:						
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*(B) INSTRUMENT RATING

Aircraft Type/Sim:	DATE:						
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* Not applicable for FEL.

SECTION IV: APPLICATION AND DECLARATION

I hereby certify that I have completed the requirements for the renewal of my ATPL/CPL/FEL and declare that since the date on which I was medically examined I have not suffered from defect, disability or disease and that the particulars given in this form are true.

MEDICAL EXPIRY:
ECG :
CHEST X-RAY :
AUDIOGRAM :

Signature of Applicant: _____

Date: _____

* Delete as appropriate.