**DD/MM/YYYY**

**SIVIL HAVACILIK GENEL MUDURLUGUNE**

**To Turkish Directorate General of Civil Aviation**

**Gazi Mustafa Kemal Bulvari No:128/A 06570 Maltepe ANKARA / TURKIYE**

We are an organization and hereby apply for SHT-66 Regulation 66.B.130 direct approval of aircraft type training.

Necessary documents and information is provided and we confirm that they are current and complete.

Sincerely yours,

Name & Signature

On behalf of the organization

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| 1. **Applicant name and adress** | | | |
| *Registered name of applicant* | | |  |
| *Trading name (if different)* | |  | |
| *Postal Address* |  | | |

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| --- | --- | --- | --- |
| 1. **Approval Information (if Applicable)** | | | |
| *DGCA Approval Ref.* | TR.XXX | *EASA Approval Ref. which is the basis of the DGCA approval* | EASA/NAA\*.XXX |

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| --- | --- |
| 1. **Addresses Requiring Approval** | |
| *Principal Place of Business address* |  |
| *Base, Engine and Component Maintenance site(s) (if different from the Principal Place of Business)* |  |
| *Line maintenance* s*tation(s) requiring approval* |  |

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| 1. **Contact information** | | | |
| *Name* | *Telephone Number* | | *Fax Number* |
|  |  | |  |
| *Quality e-mail* | | *Organization generic e-mail* | |
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| 1. **Proposed (\*) Accountable Manager Contact Details** | | |
| *Name* | *Telephone Number* | *E-mail address* |
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| 1. **Remarks** |
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| 1. **Purpose of application** | | | | |
| **☐** | 7.1. We apply for direct approval type training for mentioned on the below approval scope table. | | | |
| # | Subject | Filled by Applicant | | |
| Provided | | Remarks |
| Y | N |
| 1 | An official cover letter describing the application |  |  |  |
| 2 | Official cover letter explaining access to the aircraft on which training will be carried out |  |  |  |
| 3 | (If applicable) Copy of Other Authorities' Maintenance Training Organization Approval Certificate |  |  |  |
| 4 | MTOE, Procedures manual and Forms |  |  |  |
| 5 | The teaching methods and instructional equipment (Synchronous, Asynchronous, CBT\*, DSL\*\*, WBT\*\*\*, Classroom,…) |  |  |  |
| 6 | The examination and/or assessment procedure |  |  |  |
| 7 | The qualification of instructors, examiners and/or assessors, as applicable and List |  |  |  |
| 8 | Training Need Analysis (TNA) |  |  |  |
| 9 | A manpower plan showing that the organization has sufficient staff. |  |  |  |
| 10 | The material and documentation provided to the student |  |  |  |
| 11 | The documentation and records to be provided to the student to justify the satisfactory completion of the training course and related examination/assessment. (This should include not only a certificate of completion but enough documentation and records to justify that the content and duration approved has been met and that the examination/assessment has been successfully passed.) |  |  |  |
| 12 | Within a calendar year, has the organization get more than 2 direct approval of aircraft type training? |  |  |  |
| 13 | Bank Receipt confirming the fee have been paid |  |  |  |

\* Computer-based Training  
\*\* Distance learning  
\*\*\* Web-based Training

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| **Type/Task Training (Quote the expected aircraft type or category to be added and / or deleted.)** |
| |  |  | | --- | --- | | Training Categories | Aircraft Type(s)): | | 🞏 T1 Category B1 |  | | 🞏 T2 Category B2 |  | | 🞏 T1+T2 Category B1&B2 |  | | 🞏 T4 Category C |  | |

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| **Applicant's Commitment:**  We declare that the above information is complete and accurate. During and after the direct approval process given by the General Directorate of Civil Aviation (DGCA); we accept and declare that DGCA authorized to audit the entire process and to revoke, limit or suspend the training and examination processes. | | | |
| On behalf of the Organisation Name/Surname | Title | Sign | Date |
|  |  |  |  |