



U.S. Department of
Transportation

Federal Aviation
Administration

INFORMATION FOR APPLICANT

Application for an Airman Certificate and/or Rating

Paperwork Reduction Act Statement:

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All responses to this collection of information are mandatory per 14 CFR Part 63. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Aviation Administration, 10101 Hillwood Parkway, Fort Worth, TX 76177-1524

See Privacy Act Information Below.

Tear off this cover sheet before submitting this form.

Application for an Airman Certificate and/or Rating

PRIVACY ACT STATEMENT: This statement is provided pursuant to the Privacy Act of 1974, 5 USC § 552a:

The authority for collecting this information is contained in 49 U.S.C. §§ 40113, 44702, 44703, 44709 and 14 C.F.R. Part 6.3. The principal purpose for which the information is intended to be used is to identify and evaluate your qualifications and eligibility for the issuance of an airman certificate and/or rating. Submission of the data is mandatory, except for the Social Security Number, which is voluntary. Failure to provide all required information will result in our being unable to issue you a certificate and/or rating. The information collected on this form will be included in a Privacy Act System of Records known as DOT/FAA 847, titled "Aviation Records on Individuals" and will be subject to the routine uses published in the System of Records Notice (SORN) for DOT/FAA 847 (see <https://www.transportation.gov/individuals/privacy/privacy-act-system-records-notice>), including:

- (a) Providing basic airmen certification and qualification information to the public upon request; examples of basic information include:
- The type of certificates and ratings held, limitations, date of issuance and certificate number;
 - The status of the airman's certificate (i.e., whether it is current or has been amended, modified, suspended or revoked for any reason);
 - The airman's home address, unless requested by the airman to be withheld from public disclosure per 49 U.S.C. 44703(c);
 - Information relating to an airman's physical status or condition used to determine statistically the validity of FAA medical standards; and the date, class, and restrictions of the latest physical
 - Information relating to an individual's eligibility for medical certification, requests for exemption from medical requirements, and requests for review of certificate denials. (b) Using contact information to inform airmen of meetings and seminars conducted by the FAA regarding aviation safety.
- (c) Disclosing information to the National Transportation Safety Board (NTSB) in connection with its investigation responsibilities.
- (d) Providing information about airmen to Federal, State, local and tribal law enforcement agencies when engaged in an official investigation in which an airman is involved. (e) Providing information about enforcement actions, or orders issued thereunder, to Federal agencies, the aviation industry, and the public upon request.
- (f) Making records of delinquent civil penalties owed to the FAA available to the U.S. Department of the Treasury and the U.S. Department of Justice (DOJ) for collection pursuant to 31 U.S.C. 3711(g).
- (g) Making records of effective orders against the certificates of airmen available to their employers if the airmen use the affected certificates to perform job responsibilities for those employers.
- (h) Making airmen records available to users of FAA's Safety Performance Analysis System (SPAS), including the Department of Defense Commercial Airlift Division's Air Carrier Analysis Support System (ACAS) for its use in identifying safety hazards and risk areas, targeting inspection efforts for certificate holders of greatest risk, and monitoring the effectiveness of targeted oversight actions.
- (i) Making records of an individual's positive drug test result, alcohol test result of 0.04 or greater breath alcohol concentration, or refusal to submit to testing required under a DOT-required testing program, available to third parties, including current and prospective employers of such individuals. Such records also contain the names and titles of individuals who, in their commercial capacity, administer the drug and alcohol testing programs of aviation entities.
- (j) Providing information about airmen through the Civil Aviation Registry's Comprehensive Airmen Information System to the Department of Health and Human Services, Office of Child Support Enforcement, and the Federal Parent Locator Service that locates noncustodial parents who owe child support. Records in this system are used to identify airmen to the child support agencies nationwide in enforcing child support obligations, establishing paternity, establishing and modifying support orders and location of obligors. Records listed within the section on Categories of Records are retrieved using Connect: Direct through the Social Security Administration's secure environment.
- (k) Making personally identifiable information about airmen available to other Federal agencies for the purpose of verifying the accuracy and completeness of medical information provided to FAA in connection with applications for airmen medical certification.
- (l) Making records of past airman medical certification history data available to Aviation Medical Examiners (AMEs) on a routine basis so that AMEs may render the best medical certification decision.
- (m) Making airman, aircraft and operator record elements available to users of FAA's Skywatch system, including the Department of Defense (DoD), the Department of Homeland Security (DHS), DOJ and other authorized Federal agencies, for their use in managing, tracking and reporting aviation-related security events.
- (n) Other possible routine uses published in the Federal Register (see Prefatory Statement of General Routine Uses for additional uses (65 F.R. 19477-78) For example, a record from this system of records may be disclosed to the United States Coast Guard (Coast Guard) and to the Transportation Security Administration (TSA) if information from this system was shared with either agency when that agency was a component of the Department of Transportation (DOT) before its transfer to DHS and such disclosure is necessary to accomplish a DOT, TSA or Coast Guard function related to this system of records.

Your signature on this form (FAA Form 8400-3) acknowledges that you received the Pilot's Bill of Rights Written Notification of Investigation at the time of this application.

PILOT'S BILL OF RIGHTS WRITTEN NOTIFICATION OF INVESTIGATION

The information you submit on the attached FAA Form 8400-3, Application for an Airman Certificate and/or Rating, will be used by the Administrator of the Federal Aviation Administration as part of the basis for issuing an airman certificate, rating, or inspection authorization to you under Title 49, United States Code (U.S.C.) section 44703(a), if the Administrator finds, after investigation, that you are qualified for, and physically able to perform the duties related to the certificate, rating, or inspection authorization for which you are applying. Therefore, in accordance with the Pilot's Bill of Rights, the Administrator is providing you with this written notification of investigation of your qualifications for an airman certificate, rating, or inspection authorization:

- The nature of the Administrator's investigation, which is precipitated by your submission of this application, is to determine whether you meet the qualifications for the airman certificate, rating or inspection authorization you are applying for under Title 14, Code of Federal Regulations (CFR) part 63 or part 65.
- Any response to an inquiry by a representative of the Administrator by you in connection with this investigation of your qualifications for an airman certificate, rating, or inspection authorization may be used as evidence against you.
- A copy of your airman application file for this date is available to you upon your written request addressed to: Federal Aviation Administration Airmen Certification Branch P.O. Box 25082 Oklahoma City, OK 73125-0082 (If you make a written request for your airman application file, please provide your full name, date of birth or airman certification number for identification purposes, and the date of application.)



Application for an Airman Certificate and/or Rating

- | | | |
|----------------------------------|---|------------------------------|
| A. Flight Engineer | B. Flight Navigator | D. Aircraft Dispatcher |
| A1. Reciprocating Engine Powered | C. Control Tower Operator | E. Reissuance of Certificate |
| A2. Turbo Propeller Powered | C1. VFR Tower Rating | F. Additional Rating |
| A3. Turbojet Powered | C2. Non-Radar Approach Control Tower Rating | |

| | | |
|---------------------------------------|---------------------------------|----------------------------|
| 1. TYPE OF AIRCRAFT TO BE USED | 2. TIME IN THIS AIRCRAFT | 3. NAME OF EMPLOYER |
|---------------------------------------|---------------------------------|----------------------------|

4. APPLICANT IDENTIFICATION

| | | | | | | | |
|-------------------------------|---------|------------------|----------------|---|--|--|--|
| A. Name (First, Middle, Last) | | | | K. Permanent Mailing Address (include zip code) | | | |
| B. Social Security Number | | C. Date Of Birth | D. Height | E. Weight | | | |
| F. Hair | G. Eyes | H. Sex | I. Nationality | | | | |
| J. Place Of Birth | | | | L. Telephone Number. | | | |

5. CERTIFICATES HELD BY APPLICANT

- | | | |
|-----------------------|-----------------------|---------------------------|
| A. Pilot | B. Flight Navigator | E. Ground Instructor |
| A1. Airline Transport | A3. Flight Instructor | C. Control Tower Operator |
| A2. Commercial | A4. Private | D. Flight Engineer |
| | | F. Aircraft Dispatcher |
| | | G. Mechanic |

| | | | |
|---|-----|----|--------------------------|
| 6. Controlled Substance Violation History: Have you ever been convicted for violation of any Federal or State statutes relating to narcotic drugs, marijuana, or depressant or stimulant drugs or substances? Do not include alcohol offenses involving motor vehicle mode of transportation as those offenses are covered on the FAA Form 8500-8, Airman Medical Application Form | Yes | No | Date of Final Conviction |
|---|-----|----|--------------------------|

7. APPLICANT'S CERTIFICATION: I certify that all statements and answers provided by me on this application form are complete and true to the best of my knowledge and I agree that they are to be considered as part of the basis for issuance of any FAA certificate to me. I have received the Pilot's Bill of Rights Written Notification of Investigation that accompanies this form. I have also read and understand the Privacy Act statement that accompanies this form.

Signature of Applicant _____ Date (mm/dd/yyyy) _____

8. INSTRUCTOR'S RECOMMENDATION: I consider the above applicant ready to take the test for which he/she is applying: A. Oral Test B. Flight C. Practical Test

| | | | |
|---------|----------------------------|--|-----------------------------|
| D. Date | D1. Instructor's Signature | D2. Instructor's Certificate No. & Expiration Date | D3. Grade & Certificate No. |
| E. Date | E1. Instructor's Signature | E2. Instructor's Certificate No. & Expiration Date | E3. Grade & Certificate No. |

9. EVALUATION RECORD

| | Inspector | Examiner | Signature | Date |
|---|-----------|----------|-----------|------|
| A. Oral | | | | |
| B. Practical Test Aircraft Dispatcher | | | | |
| C. Practical Test Control Tower Operator | | | | |
| D. Simulator Check | | | | |
| E. Aircraft Flight Check | | | | |

10. INSPECTOR'S RECORD

| | | | | | | | | | | | | | | | | |
|--|-----|--|-----|-------------------------------|-----|---------------|-----|------|-----|-------|-----|--------|-------|--------|---------------------|----------------|
| A. Temporary Airman Certificate Issued | | B. Notice of Disapproval of Application Issued | | C. Examiner's Action Accepted | | | | | | | | | | | | |
| D. Date | | E. Inspector's signature | | | | F. FAA office | | | | | | | | | | |
| CP | REQ | OFFICE | COM | ISS | ACT | EMP | TRN | M.T. | DIS | CLASS | SEX | RATING | STATE | COUNTY | Aircraft Dispatcher | IFO Mailing |
| | | | | | | | | | | | | | | | Special Mailing | Correspondence |
| | | | | | | | | | | | | | | | Airmail | |

11. PRACTICAL TEST REPORT

Grading Legend (All applicable items must be graded S or U)
Explain in "Remarks" all items which are not graded.
S-Satisfactory, U-Unsatisfactory

| Item No. | A. Flight Engineer | | Grade | | Item No. | C. Aircraft Dispatcher | | Grade | | | |
|----------------------------------|---------------------------------------|----|----------|-----------|---|--|--|------------------|-----------|-------|--|
| | | | Examiner | Inspector | | | | Examiner | Inspector | | |
| 1 | Equipment Examination (<i>Oral</i>) | | | | 1 | Flight Planning/ Dispatch/Release | | | | | |
| 2 | Preflight Inspection | | | | 2 | Preflight Takeoff, Departure | | | | | |
| 3 | Normal Operating Procedures | | | | 3 | In-flight Procedures | | | | | |
| 4 | Abnormal Operating Procedures | | | | 4 | Arrival, Approach, Landing | | | | | |
| 5 | Performance Data and Cruise Control | | | | 5 | Post Flight | | | | | |
| 6 | Trouble Shooting | | | | 6 | Abnormal Emergency Procedures | | | | | |
| 7 | Emergency Procedures | | | | 7 | English Language Proficiency | | | | | |
| 8 | Forms and Records | | | | Item No. | D. Control Tower Operator | | Grade | | | |
| 9 | Post Flight | | | | | | | Examiner | Inspector | | |
| 10 | Crew Coordination | | | | | | | VFR TOWER RATING | | | |
| 11 | Judgment | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | 1 | The Control Tower | | | | | |
| | | | | | 2 | The Airport | | | | | |
| | | | | | 3 | The Control Zone | | | | | |
| | | | | | 4 | Notice to Airmen | | | | | |
| | | | | | 5 | Weather Facilities and Procedures | | | | | |
| | | | | | 6 | A Demonstration of Ability to Control Air Traffic Under VFR | | | | | |
| | | | | | NON-RADAR APPROACH CONTROL TOWER RATING | | | | | | |
| | | | | | 1 | Air Traffic Control Facilities | | | | | |
| | | | | | 2 | Air Navigation Facilities | | | | | |
| | | | | | 3 | Use of Airman's Information Manual | | | | | |
| | | | | | 4 | Holding Procedures | | | | | |
| | | | | | 5 | Approach Procedures | | | | | |
| | | | | | 6 | Missed Approach Facilities | | | | | |
| | | | | | 7 | Alternate Airports | | | | | |
| | | | | | 8 | Search and Rescue Procedures | | | | | |
| | | | | | 9 | A Demonstration of Ability to Control Air Traffic Under IFR | | | | | |
| | | | | | 10 | Airport Identification | | | | | |
| 11. Route of Flight Check | | | | | 12. Aviation English Language Standard | | | | | | |
| From | | To | | Hours | | A. Meets Aviation English Language Standard. B. Does Not Meet Aviation English Language Standards C. Referred to FSO for Aviation English Language Standard Determination. Remarks: | | | | | |
| | | | | Day | | | | | | Night | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Airman's Identification (ID) | | | | | | | | | | | |
| Form of ID | | | | | | | | | | | |
| Number | | | | | | | | | | | |
| Expiration Date | | | | | | | | | | | |

13. REMARKS

[Empty rectangular box for remarks]