Paperwork Reduction Act Burden Statement: The information collected is used to certificate pilot schools. The information is required to determine qualification and compliance. A federal agency may not conduct or sponsor, and a person isnot required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently-adid OMB Control Number for this information collection is 2120-0009. Public reporting for this collection of information is estimated to be approximatedly 30 minutes per response, including the time for reviewinginstructions, searching existing data sources, gathering and maintaining the daded, completing and reviewing the collection of information are mandatory per 14 CFR Part 141. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the FAA at: 800 Independence Ave. SW, Washington, DC 20591, Attr. Information Collection Clearance Officer, AES-200.



US Department of Transportation Federal Aviation

## **APPLICATION FOR PILOT SCHOOL CERTIFICATION**

Form approved: OMB No. 2120-0009 04/30/2019

| Administration  | CERT For FAA Use Only   |                                     |  |  |
|---|---|-------------------------------------|--|--|
| APPLICANT - Read submittal and signature instructions on reverse.   | NO.   |                                     |  |  |
| NAME OF SCHOOL TELEPHONE NO.  | ADDRESS OF PRINCIPAL BUSINESS OFFICE  |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
| LOCATION OF MAIN OPERATIONS BASE  | LOCATION OF SATELLITE BASE(S)   |                                     |  |  |
| ECOATION OF WAIN OF ENATIONS BASE   | ESSATION OF SATELETTE BASE(S)   |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
| APPLICATION IS HEREBY MADE FOR:   |   |                                     |  |  |
|   |   |                                     |  |  |
| Issuance of a Pilot School Certificate and associated ratings to conduct the training courses identified below, and for the approval of these courses (three copies of each course outline are attached); also, examining authority is requested for the courses appropriately checked. |   |                                     |  |  |
| courses (times copies of each course outline are attached), also, examining auth  | ionly is requested for the courses appropriately checked.   |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
| Renewal of a Pilot School Certificate and associated ratings currently numbered   | , which expires on  |                                     |  |  |
| without changes to the currently approved course outlines, with addition  | of course(s) identified below for which approval is requested (three  |                                     |  |  |
| copies of each course outline is attached), including request for examining authori   | ty for the course(s) appropriately checked; with deletion of curriculum.                                    | course(s) identified below from the |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
| Amending the current Pilot School Certificate and associated ratings numbered   | , which expires on  |                                     |  |  |
| by adding the course(s) identified below for which approval is requested (three copi  |   |                                     |  |  |
| examining authority where appropriately checked;  ufor deletion of the course(s   | s) identified below from the curriculum.  |                                     |  |  |
|   |   |                                     |  |  |
| IDENTIFICATION OF TRAINING COURSES  | NOTE., Where examining authority for a course is desired, p<br>box adjacent to the course identification. s | piece and "X"in the                 |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
| L   |   |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
| (If more space is   | needed, continue on reverse in space provided)  |                                     |  |  |
| I (ME) and it, that I are (up are) familiar with Part 444 of the Enderel Aristian Part Idians and to the heat of any (aux) knowledge halicus that any (aux) ashed most a the  |   |                                     |  |  |
| I (WE) certify that I am (we are) familiar with Part 141 of the Federal Aviation Regulations, and, to the best of my (our) knowledge, believe that my (our) school meets the requirements for certification as prescribed therein.  |   |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |
| ſ   |   |                                     |  |  |
| Signature   |   |                                     |  |  |
| and Title(s)  |   |                                     |  |  |
|   |   |                                     |  |  |
| Date  |   |                                     |  |  |
| FOR FAA USE ONLY  |   |                                     |  |  |
| APPROVED- a Provisional Pilot School Certificate a Pilot School Certificate, either with DISAPPROVED  |   |                                     |  |  |
| associated ratings bearing the number shown above is issued effective   |   |                                     |  |  |
| and which expires on  |   |                                     |  |  |
|   | amendments Amendments   |                                     |  |  |
|   | amenaments Amenaments   |                                     |  |  |
| SIGNATURE OF APPROVING OFFICIAL TITL  | E D <sub>i</sub>  | ATE                                 |  |  |
|   |   |                                     |  |  |
|   |   |                                     |  |  |

| Submit an origina where specified o is located. | TO THE APPLICANT: I and one copy of this application, con the face of this form, to the FAA Department of the properties application should be as follows: | •  |   |
|---|--|--|---|
| a. Application t                                | from a person acting as an individua   | al should be signed by the owner;  |   |
| b. Application                                  | from a partnership should be signed  | by all partners;   |   |
| corporation                                     | from a corporation should be signed<br>by-laws to sign for the corporation a<br>duals to sign such a document;   | I by the president or such other office and certified to by the corporate sec            | cers as authorized by the retary attesting to the authority |
| d. Application t<br>director as a               | from a company, club, or association authorized by the organization's by-land  | n should be signed by the presiden aws, and attested to by the secreta                   | t or such other officer or ry.                              |
| IDENTIFICATION OF                               | TRAINING COURSES (Continued)   | NOTE: Where examining authority for a cours<br>box adjacent to the course identification | se is desired, place and "X" in the<br>on. s                |
|   |  |  |   |
|   |  | $ \square$   |   |
|   |  |  |   |
|   |  |  |   |
|   |  | —  |   |
|   |  |  |   |
|   |  |  |   |
| LJ  |  |  |   |
|   | ACE FOR FAA USE ONLY   |  |   |
| Recommendations of Inspec                       | tor(s)   |  |   |
|   |  |  |   |
|   |  |  |   |
|   |  |  |   |
|   |  |  |   |
|   |  |  |   |
|   |  |  |   |
|   |  |  |   |
|   |  |  |   |
|   |  |  |   |
|   |  |  |   |
| INSPECTORS'                                     | FOR OPERATIONS   | FOR MAINTENANCE  | FOR AVIONICS  |
| SIGNATURES                                      | DATE   | DATE   | DATE  |

AND DATES