



U.S. Department  
of Transportation  
**Federal Aviation  
Administration**

## INSTRUCTIONS

### **FAA FORM 8060-11, AIR CARRIER AND OTHER RECORDS REQUEST (PRIA)**

Pilot Records Improvement Act Of 1996 (PRIA)

Title 49 U.S.C § 44703(h), RECORDS OF EMPLOYMENT OF PILOT APPLICANTS, as amended

Air carriers **should** use this form to request records from current and/or past employers as contemplated under 49 U.S.C. § 44703(h).

### NOTICE

**Request will not be deemed valid unless Parts I and II are completed as specified below.**

**Pursuant to 49 U.S.C. § 44703(h)(5), a person who receives a request for records under 49 U.S.C. § 44703(h)(1) shall furnish a copy of all such requested records maintained by the person not later than 30 days after receiving the request.**

This form may be photocopied for use.

This form is available at [http://www.faa.gov/pilots/lic\\_cert/pria/](http://www.faa.gov/pilots/lic_cert/pria/) or <http://forms.faa.gov/>

A separate form must be used for each airman whose records are requested.

**DO NOT use this form to request Pilot Records from the Federal Aviation Administration.**

**Part I – *Air Carrier and Other Records Request (PRIA): To be completed by the hiring Air Carrier.***

**All entries must be completed legibly with black or dark blue ink.**

1. To – enter the address of the airman’s previous employer. (Hiring air carrier may instruct the applicant to make this entry)
2. Name, title, and signature – enter the name, title, and signature of the person making the request on behalf of the air carrier.
3. Date – enter the date of the request.
4. Mailing address – provide a complete company mailing address to which the *air carrier* or *person* will mail the requested records.

**Part II – *Airman Consent For The Release Of Records: To be completed by Airman/Applicant.***

**All entries must be completed legibly with black or dark blue ink.**

1. Name – enter your name as it is shown on your airman certificate(s).
2. Airman Certificate Number – enter your airman certificate number(s). In parenthesis after the certificate number, indicate the type of certificate by using C (Commercial), A (Airline Transport Pilot), F (Flight Instructor) or G (Ground Instructor). If you have multiple certificates with the same certificate number, list the certificate number once and indicate the types of certificates in parenthesis. For example, if you hold an Airline Transport Pilot Certificate as well as Flight Instructor and Ground Instructor Certificates using the same number, you should indicate as follows: Certificate No. 456231234 (A, F, G).
3. Signature and Date – Sign in ink using your legal signature, then enter the date of the request.
4. **\*Mailing Address – This information is required to provide notice to the airman that a request for records has been received, and of the airman’s right to receive a copy of the records provided to the requesting air carrier.**

### ***PAPERWORK REDUCTION ACT STATEMENT***

A federal agency may not conduct or sponsor, and a person is not 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 valid OMB Control Number. The OMB Control Number for this information collection is 2120-0607. Public reporting for this collection of information is estimated to be approximately 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing and reviewing the collection of information.

All responses to this collection of information are mandatory (Title 49 United States Code (49 U.S.C.) § 44703(h). 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



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### AIR CARRIER AND OTHER RECORDS REQUEST (PRIA)

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#### NOTICE

*Request will not be deemed valid unless Parts I and II are completed as specified in the instructions.*

*Pursuant to 49 U.S.C. § 44703(h)(5), the Air Carrier, as a person who receives a request for records under 49 U.S.C. § 44703(h)(1)(B) shall furnish a copy of such requested records maintained by that person not later than 30 days after receiving the request.*

#### **PART I: AIR CARRIER AND OTHER RECORDS REQUEST (PRIA)**

To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_, \_\_\_\_\_, hereby requests copies of  
(Air Carrier Name) (Air Carrier Certificate Number)  
records as required under 49 U.S.C. § 44703(h)(1)(B), as amended, pertaining to the airman consenting in Part II below.

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
(Print – Air Carrier Representative) (Print—Title of Air Carrier Representative)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Air Carrier Representative)

Mail Records To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

#### **PART II: AIRMAN CONSENT FOR THE RELEASE OF RECORDS**

I \_\_\_\_\_, consent to and authorize my current or previous  
(Print – Airman’s First, Middle, and Last Name)  
employer \_\_\_\_\_ to release records pertaining to  
(Print—Employer Name)  
me as required under 49 U.S.C. § 44703(h)(1)(B) to the air carrier named in Part I above.

Airman Certificate Number(s): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Not valid unless signed and dated)

\*Mailing address: \_\_\_\_\_  
(\*Indicates required information. See Instructions: Part II, item 4)

Telephone: \_\_\_\_\_