U.S. Department
of Transportation
Federal Aviation
Administration

FAA 8400-3, Application for an Airman Certificate and/or Rating

Supplemental Information and Instructions

OMB Control Number: 2120-0007
Expiration Date: 06/30/2026

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 2120-0007. 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 voluntary. 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.

Privacy Act Statement

Privacy Act Statement (5 U.S.C. § 552(a)(e)(3)):

Authority: The authorities for collecting information by the form FAA 8400-3, Application for an Airman Certificate and/or Rating, is 49 U.S.C. §§ 40113, 44702, 44703, 44709, and 14 CFR Part 63.

Purpose: The form FAA 8400-3 collects the applicant's name, social security number, date of birth, place of birth, address and phone number. The principal purpose for collecting the information is to identify and evaluate your qualifications and eligibility for the issuance of an airman certificate and/or rating.

Routine Uses: The information collected by form FAA 8400-3 is shared in accordance with the Privacy Act system of records notice (SORN) DOT/FAA 847 - Aviation Records on Individuals (89 75 FR 48956 - June 10, 2024).

Disclosure: Submission of this data is mandatory, except for the social security number, which is voluntary. However, an incomplete submission may result in delay in a response and/or an inability to process the application.

Your signature on this form (FAA 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 form FAA 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, AFB-720
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.)

U.S. Department of Transportation
Federal Aviation Administration

Application for Airman Certificate and/or Rating

Instructions for Completing Form FAA 8400-3

General Information

In support of the Government Paperwork Elimination Act (GPEA), this form should only be used when IACRA is not available or when a Letter of Aeronautical Competency has been issued to an applicant under the age of 23. The form must be completed accurately for it to be accepted by the Airmen Certification Branch. *The most current edition of this form can be found at:* https://www.faa.gov/forms/

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Under the title "Application for an Airman Certificate and/or Rating". Mark 'X' in all the blocks applicable to the certificate or rating for which you are applying or for the information you submit to validate certain certification requirements.

Enter all dates in eight digits as MM/DD/YYYY.
Use numeric characters. (e.g. 01/01/2099).

Block 1. Type of Aircraft to be Used. If flight test required.

Block 2. Time in this Aircraft. Enter flight time in hours, if applicable.

Block 3. Name of Employer/Operator/Approved Course. Enter name of Employer, Operator and/or Approved Course.

Block 4. Applicant Identification

A. Name. Enter full legal name (Last, First, Middle). If your full legal name is more than 50 characters, use no more than one middle name for record purposes. If you do not have a middle name, enter "NMN." If you have a middle initial only, indicate "Initial only." Indicate if you are a Jr., II, or III.

B. FAA Tracking Number (FTN). Enter your FTN.

C. Date of Birth. Enter your date of birth in the following format: MM/DD/YYYY. Check for accuracy.

D. Height. Enter your height in inches. Example: 5'8" would be entered as 68 in. No fractions, use whole inches only.

E. Weight. Enter your weight in pounds. No fractions, use whole pounds only.

F. Hair Color. Spell out the color of your hair. Choose from the following: bald, black, blonde, brown, gray, red or white. If you wear a wig or toupee, enter the color of your hair under the wig or toupee.

G. Eye Color. Spell out the color of your eyes. Choose from the following: black, blue, brown, gray, green, or hazel.

H. Sex. Mark either Male or Female, as appropriate.

I. Nationality / Citizenship. Enter "USA" if you are a U.S. Citizen or legally naturalized U.S. Citizen. If you are not a U.S. citizen, enter the country where you are a legal citizen.

J. Place of Birth. If you were born in the USA, enter the city and state where you were born. If the city is unknown, enter the county and state. If you were born outside the USA, enter the name of the city and country where you were born.

K. Residential Mailing Address. Enter a complete residential address. This address will be printed on the permanent airman certificate. This must include street number, city, state, and zip code. If the applicant has a foreign address, the country must be stated. If a residential address does not exist, a map or written directions to the applicant's physical residence must be attached to the application. A P.O. Box is only acceptable in this block when accompanied by additional mailing instructions.
NOTE: *Additional mailing instructions can be added to Block 13, Remarks on this form*.

L. Telephone Number. Enter a complete telephone number to include area code and country code, as applicable.

M. Email Address. Enter a complete email address (optional).

Block 5. Certificates Held by Applicant. Mark off boxes as applicable. Each certificate number should be listed in Block 13, Remarks.

Block 6. Controlled Substance Violation History. Mark appropriate box. Only mark "Yes" if you have actually been convicted. If you have been charged with a violation which has not been adjudicated, mark "No." If "Yes" was marked, provide the date of the final conviction.

Block 7. Applicant's Certification. Applicant signs their name. Enter the date the applicant signed the application. *Note: A typed or electronic signature is not acceptable for an applicant.*

Block 8. Instructor's Recommendation. A. – C. Mark 'X' in all the blocks applicable to the certificate or rating for which you are applying. Leave blank if exchanging a Letter of Aeronautical Competency (Aircraft Dispatchers) for a Temporary Airman Certificate.

Block 8. D. – E. Enter the date the instructor signed the application, instructor's signature, and instructor's certificate number. Leave blank if exchanging a Letter of Aeronautical Competency (Aircraft Dispatchers).

Block 9. Evaluator's Record. To be completed by Inspector or Examiner. Add certificate number (preferred), or Designee Management System (DMS) number.

Block 9. A-E. The Inspector or Examiner will mark an "X" in the applicable blocks for the certificates and/or ratings the applicant is applying for, leave inapplicable fields blank. And then sign and date the form.

Block 10. Inspector's Record. Mark 'X' in all the blocks applicable to the certificate or rating for which you are applying.

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11. Practical Test Report.

A. Flight Engineer. All applicable items must be graded S or U.)

B. Flight Navigator. All applicable items must be graded S or U.)

C. Aircraft Dispatcher. All applicable items must be graded S or U.)

D. Control Tower Operator. All applicable items must be graded S or U.)

Form of ID. Below this block enter the form of ID used (e.g. Passport, Driver's License, etc.) **NOTE:** *Reference FAA Order 8900.1, Volume 5 for identification requirements*.

Number on ID. Below this block enter the number which appears on the form of ID used.

Expiration Date of ID. Enter the expiration date which appears on the form of ID used. **NOTE***: Expiration date must be valid.*

12. Aviation English Language Standard. Mark 'X' in appropriate fields.

13. Remarks. Enter any remarks, as needed.

Tear off this cover sheet before submitting this form.

OMB Control Number: 2120-0007
Expiration Date: 06/30/2026

U.S. Department of Transportation
Federal Aviation Administration

Application for an Airman Certificate and/or Rating

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

1. Type of Aircraft to be Used	2. Time in this Aircraft	3. Name of Employer / Operator / Approved Course

4. Applicant Identification

A. Name (*Last, First, Middle*)

B. FAA Tracking Number (FTN)	C. Date of Birth (MM/DD/YYYY)	D. Height (inches)	E. Weight (pounds)

F. Hair Color	G. Eye Color	H. Sex ☐ Male ☐ Female	I. Nationality / Citizenship

J. Place of Birth

K. Residential Mailing Address *(including City, State, and Zip Code)*

L. Telephone Number

M. Email Address

5. Certificates Held by Applicant

A. ☐ Pilot
A1. ☐ Airline Transport
A2. ☐ Commercial
A3. ☐ Flight Instructor
A4. ☐ Private
B. ☐ Flight Navigator
C. ☐ Control Tower Operator
D. ☐ Flight Engineer
E. ☐ Ground Instructor
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 form FAA 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. Evaluator's Record

	Inspector	Examiner	Signature	Certificate Number	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

11. Practical Test Report

Airman's Identification (Last, First, Middle)			
Form of ID	Number on ID	Expiration Date of ID	FAA Tracking Number (FTN)

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

A. Flight Engineer

Item No.		Grade Examiner	Grade Inspector
1.	Equipment Examination *(Oral)*	☐ S ☐ U	☐ S ☐ U
2.	Preflight Inspection	☐ S ☐ U	☐ S ☐ U
3.	Normal Operating Procedures	☐ S ☐ U	☐ S ☐ U
4.	Abnormal Operating Procedures	☐ S ☐ U	☐ S ☐ U
5.	Performance Data and Cruise Control	☐ S ☐ U	☐ S ☐ U
6.	Trouble Shooting	☐ S ☐ U	☐ S ☐ U
7.	Emergency Procedures	☐ S ☐ U	☐ S ☐ U
8.	Forms and Records	☐ S ☐ U	☐ S ☐ U
9.	Post Flight	☐ S ☐ U	☐ S ☐ U
10.	Crew Coordination	☐ S ☐ U	☐ S ☐ U
11.	Judgment	☐ S ☐ U	☐ S ☐ U

B. Flight Navigator

Item No.		Grade Examiner	Grade Inspector
1.	Equipment (Oral)	☐ S ☐ U	☐ S ☐ U
2.	Equipment Check	☐ S ☐ U	☐ S ☐ U
3.	Preflight Training	☐ S ☐ U	☐ S ☐ U
4.	Normal Navigation Procedures	☐ S ☐ U	☐ S ☐ U
5.	Knowledge of Navigation Methods	☐ S ☐ U	☐ S ☐ U
6.	Coordination of Navigational Methods	☐ S ☐ U	☐ S ☐ U
7.	Emergency Procedures	☐ S ☐ U	☐ S ☐ U
8.	Coordination of Duties	☐ S ☐ U	☐ S ☐ U
9.	Crew Coordination	☐ S ☐ U	☐ S ☐ U
10.	Judgment	☐ S ☐ U	☐ S ☐ U

11. Route Flight Check

Departure Airport	Destination Airport	Hours Day	Hours Night

C. Aircraft Dispatcher

Item No.		Grade Examiner	Grade Inspector
1.	Flight Planning / Dispatch Release	☐ S ☐ U	☐ S ☐ U
2.	Preflight, Takeoff, Departure	☐ S ☐ U	☐ S ☐ U
3.	Inflight Procedures	☐ S ☐ U	☐ S ☐ U
4.	Arrival, Approach, Landing	☐ S ☐ U	☐ S ☐ U
5.	Post Flight	☐ S ☐ U	☐ S ☐ U
6.	Abnormal Emergency Procedures	☐ S ☐ U	☐ S ☐ U
7.	English Language Proficiency	☐ S ☐ U	☐ S ☐ U

D. Control Tower Operator

VFR Tower Rating

Item No.		Grade Examiner	Grade Inspector
1.	The Control Tower	☐ S ☐ U	☐ S ☐ U
2.	The Airport	☐ S ☐ U	☐ S ☐ U
3.	The Control Zone	☐ S ☐ U	☐ S ☐ U
4.	Notice to Airmen	☐ S ☐ U	☐ S ☐ U
5.	Weather Facilities and Procedures	☐ S ☐ U	☐ S ☐ U
6.	A Demonstration of Ability to Control Air Traffic Under VFR	☐ S ☐ U	☐ S ☐ U

Non-Radar Approach Control Tower Rating

Item No.		Grade Examiner	Grade Inspector
1.	Air Traffic Control Facilities	☐ S ☐ U	☐ S ☐ U
2.	Air Navigation Facilities	☐ S ☐ U	☐ S ☐ U
3.	Use of Airman's Information Manual	☐ S ☐ U	☐ S ☐ U
4.	Holding Procedures	☐ S ☐ U	☐ S ☐ U
5	Approach Procedures	☐ S ☐ U	☐ S ☐ U
6.	Missed Approach Facilities	☐ S ☐ U	☐ S ☐ U
7.	Alternate Airports	☐ S ☐ U	☐ S ☐ U
8.	Search and Rescue Procedures	☐ S ☐ U	☐ S ☐ U
9.	Demonstration of Ability to Control Air Traffic Under IFR	☐ S ☐ U	☐ S ☐ U
10.	Airport Identification	☐ S ☐ U	☐ S ☐ U

12. Aviation English Language Standard

Title 14 CFR §63.31 does not require English proficiency for Flight Engineer certificates. For special purpose certificates under §63.23:

- With English endorsement on foreign license: Check box A for "Meets Aviation English Language Standard."
- Without English endorsement: Leave box 12 unchecked, note in block 13: "English proficiency has not been validated"

Title 14 CFR §63.51 requires English proficiency for Flight Navigator certificates. Applicants for special purpose Flight Navigator certificates under §63.23 must be English proficient.

A. ☐ Meets Aviation English Language Standard B. ☐ Does Not Meet Aviation English Language ☐ Referred to FSO for Aviation English Language Standard Determination.

13. Remarks