

Approved Training Organisation (ATO) - Application

Application for the issue of a certificate as an approved training organisation according to Commission Regulation (EU) No 1178/2011 Annex VII (Part-ORA)

Please fill in the framed fields of the form, sign it and send it together with attachments to:

AUSTRO CONTROL GmbH, Aviation Agency, Management Services, Wagramer Straße 19, 1220 Vienna, Austria

If you require additional lines in any of the tables please attach the additional information as a separate document to the application.

1 Application Type

Application for ATO Initial Approval [ATOneu]

Application for ATO Approval Change [ATOändern]

ATO Approval No.:

Date of Intended Activity Commencement (dd Month yyyy)

2 Applicant

Registered name of applicant*

Trading name (if different)

Street

Place

Postal

Country

3 Accountable Manager (AM)

Title

First Name

Family Name

Phone

Fax

E-Mail

4 Head of Training (HT)

Title

First Name

Family Name

Licence Type

Licence Number

Employment: Full Time Part Time

5 Chief Flight Instructor (CFI)

Title

First Name

Family Name

Licence Type

Licence Number

Employment: Full Time Part Time

6 Chief Theoretical Knowledge (CTKI)

Title

First Name

Family Name

Licence Type

Licence Number

Employment: Full Time Part Time

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7 Compliance Monitoring Manager (CMM)

Title	First Name	Family Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Licence Type	Licence Number
<input type="text"/>	<input type="text"/>

Employment: Full Time Part Time

8 Safety Manager (SM)

Title	First Name	Family Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Licence Type	Licence Number
<input type="text"/>	<input type="text"/>

Employment: Full Time Part Time

9 Training Sites Annex I

List of sites where the training courses will be provided: (Please enter the full address details for each training site.)

Training Site

1	<input type="text"/>
2	<input type="text"/>
3	<input type="text"/>
4	<input type="text"/>
5	<input type="text"/>

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10 Training Courses Annex II

List of training courses to be provided: (Please enter the course name/identification/course FCL type and selected type(s) of training.)

Course Name and FCL Type

1

Type of Training: Theory Flight Training/Simulation

2

Type of Training: Theory Flight Training/Simulation

3

Type of Training: Theory Flight Training/Simulation

4

Type of Training: Theory Flight Training/Simulation

5

Type of Training: Theory Flight Training/Simulation

6

Type of Training: Theory Flight Training/Simulation

7

Type of Training: Theory Flight Training/Simulation

8

Type of Training: Theory Flight Training/Simulation

9

Type of Training: Theory Flight Training/Simulation

10

Type of Training: Theory Flight Training/Simulation

11

Type of Training: Theory Flight Training/Simulation

12

Type of Training: Theory Flight Training/Simulation

13

Type of Training: Theory Flight Training/Simulation

14

Type of Training: Theory Flight Training/Simulation

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11 Flight Instructors Annex III

Total number of ground and flight instructors

List of flight instructors employed to provide the training courses offered: (Please enter the name of the instructor, the type of licence, the licence number and employment type. For foreign licence holders please attach a copy of the licence to the application.)

	Instructor Name	Type of Licence	Licence Number
1	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		
2	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		
3	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		
4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		
5	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		
6	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		
7	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		
8	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		
9	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		
10	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		
11	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		
12	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		
13	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		

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12 Aerodrome(s) and/or operating site(s) to be used Annex IV

List of aerodromes used to provide training courses: (Please enter the full name and address of all aerodromes where training is taking place.)

Aerodrome (1= Home Base Aerodrome)

1	<input type="text"/>
	<input type="checkbox"/> IFR approaches <input type="checkbox"/> Night Flying <input type="checkbox"/> Air Traffic Control <input type="checkbox"/> Flight testing facility <input type="checkbox"/> Data reply facility
2	<input type="text"/>
	<input type="checkbox"/> IFR approaches <input type="checkbox"/> Night Flying <input type="checkbox"/> Air Traffic Control <input type="checkbox"/> Flight testing facility <input type="checkbox"/> Data reply facility
3	<input type="text"/>
	<input type="checkbox"/> IFR approaches <input type="checkbox"/> Night Flying <input type="checkbox"/> Air Traffic Control <input type="checkbox"/> Flight testing facility <input type="checkbox"/> Data reply facility
4	<input type="text"/>
	<input type="checkbox"/> IFR approaches <input type="checkbox"/> Night Flying <input type="checkbox"/> Air Traffic Control <input type="checkbox"/> Flight testing facility <input type="checkbox"/> Data reply facility
5	<input type="text"/>
	<input type="checkbox"/> IFR approaches <input type="checkbox"/> Night Flying <input type="checkbox"/> Air Traffic Control <input type="checkbox"/> Flight testing facility <input type="checkbox"/> Data reply facility

13 Flight Operations Accommodation Annex V

List of all rooms used as flight operations accommodation: (Please enter the location, number of rooms and size.)

	Location	Number, Size (Length x Width)
1	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>

14 Theoretical Instruction Facilities Annex VI

List of all rooms used as theoretical instruction facilities: (Please enter the location, number of rooms and size.)

	Location	Number, Size (Length x Width)
1	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>

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15 Training Devices Annex VII

List of all training devices used to provide training courses: (If applicable please identify the device, the aircraft type, type of device and give a reference/number to the training courses the training device is used in.)

Identification	Type of Aircraft	Training Courses
1 <input type="text"/>	<input type="text"/>	<input type="text"/>
Type of Device: <input type="checkbox"/> FFS <input type="checkbox"/> FNPT I <input type="checkbox"/> FNPT II <input type="checkbox"/> FNPT III <input type="checkbox"/> FTD 1 <input type="checkbox"/> FTD 2 <input type="checkbox"/> FTD 3 <input type="checkbox"/> BITD		
2 <input type="text"/>	<input type="text"/>	<input type="text"/>
Type of Device: <input type="checkbox"/> FFS <input type="checkbox"/> FNPT I <input type="checkbox"/> FNPT II <input type="checkbox"/> FNPT III <input type="checkbox"/> FTD 1 <input type="checkbox"/> FTD 2 <input type="checkbox"/> FTD 3 <input type="checkbox"/> BITD		
3 <input type="text"/>	<input type="text"/>	<input type="text"/>
Type of Device: <input type="checkbox"/> FFS <input type="checkbox"/> FNPT I <input type="checkbox"/> FNPT II <input type="checkbox"/> FNPT III <input type="checkbox"/> FTD 1 <input type="checkbox"/> FTD 2 <input type="checkbox"/> FTD 3 <input type="checkbox"/> BITD		
4 <input type="text"/>	<input type="text"/>	<input type="text"/>
Type of Device: <input type="checkbox"/> FFS <input type="checkbox"/> FNPT I <input type="checkbox"/> FNPT II <input type="checkbox"/> FNPT III <input type="checkbox"/> FTD 1 <input type="checkbox"/> FTD 2 <input type="checkbox"/> FTD 3 <input type="checkbox"/> BITD		
5 <input type="text"/>	<input type="text"/>	<input type="text"/>
Type of Device: <input type="checkbox"/> FFS <input type="checkbox"/> FNPT I <input type="checkbox"/> FNPT II <input type="checkbox"/> FNPT III <input type="checkbox"/> FTD 1 <input type="checkbox"/> FTD 2 <input type="checkbox"/> FTD 3 <input type="checkbox"/> BITD		
6 <input type="text"/>	<input type="text"/>	<input type="text"/>
Type of Device: <input type="checkbox"/> FFS <input type="checkbox"/> FNPT I <input type="checkbox"/> FNPT II <input type="checkbox"/> FNPT III <input type="checkbox"/> FTD 1 <input type="checkbox"/> FTD 2 <input type="checkbox"/> FTD 3 <input type="checkbox"/> BITD		
7 <input type="text"/>	<input type="text"/>	<input type="text"/>
Type of Device: <input type="checkbox"/> FFS <input type="checkbox"/> FNPT I <input type="checkbox"/> FNPT II <input type="checkbox"/> FNPT III <input type="checkbox"/> FTD 1 <input type="checkbox"/> FTD 2 <input type="checkbox"/> FTD 3 <input type="checkbox"/> BITD		
8 <input type="text"/>	<input type="text"/>	<input type="text"/>
Type of Device: <input type="checkbox"/> FFS <input type="checkbox"/> FNPT I <input type="checkbox"/> FNPT II <input type="checkbox"/> FNPT III <input type="checkbox"/> FTD 1 <input type="checkbox"/> FTD 2 <input type="checkbox"/> FTD 3 <input type="checkbox"/> BITD		

16 Aircraft Annex VIII

List of all aircraft used to provide training courses: (Please identify the aircraft registration, type designation and IFR.)

Registration	Class/ Type of Aircraft
1 <input type="text"/>	<input type="text"/>
Equipped: <input type="checkbox"/> IFR <input type="checkbox"/> Flight test instrumentation <input type="checkbox"/> NVFR <input type="checkbox"/> Towing <input type="checkbox"/> Acrobatics	
2 <input type="text"/>	<input type="text"/>
Equipped: <input type="checkbox"/> IFR <input type="checkbox"/> Flight test instrumentation <input type="checkbox"/> NVFR <input type="checkbox"/> Towing <input type="checkbox"/> Acrobatics	
3 <input type="text"/>	<input type="text"/>
Equipped: <input type="checkbox"/> IFR <input type="checkbox"/> Flight test instrumentation <input type="checkbox"/> NVFR <input type="checkbox"/> Towing <input type="checkbox"/> Acrobatics	
4 <input type="text"/>	<input type="text"/>
Equipped: <input type="checkbox"/> IFR <input type="checkbox"/> Flight test instrumentation <input type="checkbox"/> NVFR <input type="checkbox"/> Towing <input type="checkbox"/> Acrobatics	
5 <input type="text"/>	<input type="text"/>
Equipped: <input type="checkbox"/> IFR <input type="checkbox"/> Flight test instrumentation <input type="checkbox"/> NVFR <input type="checkbox"/> Towing <input type="checkbox"/> Acrobatics	

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6

Equipped: IFR Flight test instrumentation NVFR Towing Acrobatics

7

Equipped: IFR Flight test instrumentation NVFR Towing Acrobatics

8

Equipped: IFR Flight test instrumentation NVFR Towing Acrobatics

9

Equipped: IFR Flight test instrumentation NVFR Towing Acrobatics

10

Equipped: IFR Flight test instrumentation NVFR Towing Acrobatics

11

Equipped: IFR Flight test instrumentation NVFR Towing Acrobatics

12

Equipped: IFR Flight test instrumentation NVFR Towing Acrobatics

17 Details of proposed compliance monitoring system

Enter the reference to the organisation's document

Detailed description of the compliance monitoring function of the management system

List, table or cross-reference indicating what means and methods are dedicated to achieve initial and continued compliance with each implemented requirement applicable to the organisation

Means and methods establishing the internal audit process

Means and methods establishing the feedback system of audit findings to the accountable manager

Nominated person or group of persons, ultimately responsible to the accountable manager of ensuring that the organisation remains in compliance with the applicable requirements

Means and methods making personnel aware of their responsibilities

Procedure for amending the documentation

Means and methods to ensure initial and continued compliance of contracted activities

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Compliance with the requirement for the direct safety accountability of the accountable manager

Compliance with the requirements for the organisation's safety policy

Compliance with the requirement for the identification of aviation safety hazards entailed by the activities of the organisation (in terms of means and methods)

Compliance with the requirement for the evaluation and the management of risks associated with the identified aviation safety hazards (in terms of means and methods)

Compliance with the requirement for the actions to be taken to mitigate the risk and verify their effectiveness (in terms of means and methods)

Compliance with the requirement for making personnel aware of their responsibilities as regards the safety functions (in terms of means and methods)

18 Notes

If answers to any of the above questions are incomplete: Please provide full details of alternative arrangements separately. Regulation (EU) 2018/1139 specifies that EASA shall issue and renew certificates of pilot training organisations located outside the territory of the EU Member States. Therefore please enclose with this application a copy of your Certificate of Incorporation (for profit organisations) or the equivalent official document (for non-profit organisations) confirming the legal status of your organisation.

19 Documents and manuals to be submitted with application (as applicable)

- Management System Documentation
- Training Manual(s)
- Nominated Persons CVs (all nominated persons)
- Instructors CVs and Training Records
- Foreign registered aircraft's paperwork (Certificates, CAMO)
- Operational Manual
- Training Programs
- Police record of the Accountable Manager (original)
- Foreign Instructors Pilot Licences (copy)

20 Signature

I declare that I have the legal capacity to submit this application to Austro Control and that all information provided in this application form is correct and complete.

Place

Date

Signature of Accountable Manager