



Telephone number:
Physical address:
Postal address:

Recreation Aviation Administration South Africa

011 082 1000 Fax Number: 011 082 1020
Hangar 50, Hurricane Road, Rand Airport, Germiston
PostNet Suite #118, Private Bag X1037, Germiston, 1400

E-mail: Info@raasa.co.za

DETAILS OF BANK ACCOUNT FOR PAYMENT OF PRESCRIBED FEE		
Bank: Standard Bank	Branch: Alberton	Account Number: 020615264
	Branch Code: 012342	

APPLICATION FOR A GLIDER PILOT LEARNERS CERTIFICATE

Requirements for Application

1. **Certified:** copy of ID or Passport
2. 1x Passport size photo
3. **Original yellow or Certified:** copy of valid medical applicable to your category Part 67.
4. Copy of Restricted Radiotelephony Certificate, (Proof of Language proficiency and practical radio skills test)
5. Copy of current license (if previous license was held)
6. Appropriate fees as per Part 187 & Proof of Payment.

GLD		TMG							
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1. Surname of applicant (Mr/Mrs/Miss)
(Block letters)
2. First names
(Block letters)
3. Identity Number
4. Current license number (if applicable)
5. Nationality Permanent resident in SA? **YES / NO**
6. Residential address
.....Code:
7. Postal address
..... Code:
8. Telephone Number Cell No:
9. Email address
10. Aviation training organisation.....ATO No:
11. Training instructor.....
12. Date
.....
Signature of Applicant

NB: Refer to second page for Competency Certificate to be signed by Instructor

CERTIFICATE OF COMPETENCY

Certificate

I certify that the applicant complies with the training requirements for student pilots and has passed a written test as prescribed in TS 62.02.2.

Aircraft type (s)

Name of instructor
(Block letters)

Licence number.....

Telephone.....

Email address.....

Date

.....
Signature of Instructor Grade: C / B / A