

**TEAR OFF
BEFORE USE**

U.S. Department of Transportation
Federal Aviation Administration

**SUPPLEMENTAL
INFORMATION**

AIRMAN CERTIFICATE AND/OR RATING APPLICATION - PRIVACY ACT

This supplements the form appearing below, Airman Certificate and/or Rating Application .

The information on the form is solicited under authority of Federal Aviation Regulations, Part 65.

Submission of all the data is mandatory except for Social Security Account Number which is voluntary.

The purpose of this information is to establish eligibility for certification and/or airman rating.

The data will be used to identify and evaluate your qualifications and eligibility for the issuance of an airman certificate and/or rating.

Certification cannot be completed unless the data is complete.

Disclosure of your Social Security Account Number is optional: Disclosure will facilitate maintenance of your records which are maintained in alphabetical order and cross referenced with your SSAN and airman number to provide prompt access. In the event of nondisclosure a unique number will be assigned to your file.

☐ REPAIRMAN

STATE

☐ NO☐ YES (If "Yes," explain on an attached sheet keying to appropriate item number).

<input type="checkbox"/> A. CIVIL EXPERIENCE	<input type="checkbox"/> B. MILITARY EXPERIENCE	<input type="checkbox"/> C. LETTER OF RECOMMENDATION FOR REPAIRMAN <i>(Attach copy)</i>
<input type="checkbox"/> D. GRADUATE OF APPROVED COURSE		
<input type="checkbox"/> E. STUDENT HAS MADE SATISFACTORY PROGRESS AND IS RECOMMENDED TO TAKE THE ORAL/ PROACTICAL TEST (FAR 65.80)		
<input type="checkbox"/> F. SPECIAL AUTHORIZATION TO TAKE MECHANIC'S ORAL/PRACTICAL TEST (FAR 65.800)		
<input type="checkbox"/> A. MILITARY COMPETANCE OBTAINED IN		

B. APPLICANT'S OTHER THAN FAA CERTIFICATED SCHOOL GRADUATES. LIST EXPERIENCE RELATING TO CERTIFICATE AND RATING APPLIED FOR.
(Continue on separate sheet, if more space is needed).

	TYPE WORK PERFORMED

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☐ SENIOR
RIGGER

☐ MILITARY
RIGGER

V.

FOR FAA USE ONLY

Emp.	.reg.	D.O.	.seal	.con	iss.	Act	.lev	.TR	.s.h.	.Src	#te	Rating (1)	Rating (2)	Rating (3)	Rating (4)
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Results of Oral and Practical Tests

MECHANIC									
I. GENERAL - Airframe and powerplant									
ORAL TEST		PASS		<input type="checkbox"/>		EXPIRATION DATE:		FAIL <input type="checkbox"/>	
QUES. NO.									
PRACTICAL TEST		PASS		<input type="checkbox"/>		EXPIRATION DATE:		FAIL <input type="checkbox"/>	
PROJ. NO.									
II. AIRFRAME STRUCTURES									
ORAL TEST		PASS		<input type="checkbox"/>		EXPIRATION DATE:		FAIL <input type="checkbox"/>	
QUES. NO.									
PRACTICAL TEST		PASS		<input type="checkbox"/>		EXPIRATION DATE:		FAIL <input type="checkbox"/>	
PROJ. NO.									
III. AIRFRAME SYSTEMS AND COMPONENTS									
ORAL TEST		PASS		<input type="checkbox"/>		EXPIRATION DATE:		FAIL <input type="checkbox"/>	
QUES. NO.									
PRACTICAL TEST		PASS		<input type="checkbox"/>		EXPIRATION DATE:		FAIL <input type="checkbox"/>	
PROJ. NO.									
IV. POWERPLANT THEORY AND MAINTENANCE									
ORAL TEST		PASS		<input type="checkbox"/>		EXPIRATION DATE:		FAIL <input type="checkbox"/>	
QUES. NO.									
PRACTICAL TEST		PASS		<input type="checkbox"/>		EXPIRATION DATE:		FAIL <input type="checkbox"/>	
PROJ. NO.									
V. POWERPLANT SYSTEMS AND COMPONENTS									
ORAL TEST		PASS		<input type="checkbox"/>		EXPIRATION DATE:		FAIL <input type="checkbox"/>	
QUES. NO.									
PRACTICAL TEST		PASS		<input type="checkbox"/>		EXPIRATION DATE:		FAIL <input type="checkbox"/>	
PROJ. NO.									

PARACHUTE RIGGER			
TYPE	SEAT	PASS <input type="checkbox"/>	FAIL <input type="checkbox"/>
	BACK	PASS <input type="checkbox"/>	FAIL <input type="checkbox"/>
	CHEST	PASS <input type="checkbox"/>	FAIL <input type="checkbox"/>
	LAP	PASS <input type="checkbox"/>	FAIL <input type="checkbox"/>
		PASS <input type="checkbox"/>	FAIL <input type="checkbox"/>

REMARKS

DESIGNATED EXAMINER'S REPORT

I have personally tested this applicant in accordance with pertinent procedures and standards, and

I HAVE INDICATED THE RESULT AS:

☐ APPROVED (Temporary Certificate Issued) ☐ APPROVED (Temporary Certificate **NOT** Issued)

☐ DISAPPROVED ☐ FAR 65.80 - ORAL/PRACTICAL PASSED

ATTACH-MENTS:

☐ REPORT OF WRITTEN TEST ☐ SUPERSEDED CERTIFICATE ☐ LETTER

☐ FAA FORM 8610-2 ☐ TEMPORARY CERTIFICATE ☐ SEAL SYMBOL CARD

DATE TEST COMPLETED	EXAMINER'S SIGNATURE	DESIGNATION NO.
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APPLICANT'S CERTIFICATION

THIS BLOCK MUST BE COMPLETED BY THE APPLICANT AT THE TIME OF ISSUANCE OF TEMPORARY CERTIFICATE (FAA FORM 8060-4)

A. HAVE YOU EVER HAD AN AIRMAN CERTIFICATE SUSPENDED OR REVOKED?

☐ NO ☐ Yes If "Yes," explain on an attached sheet.

B. HAVE YOU EVER BEEN CONVICTED FOR VIOLATION OF ANY FEDERAL OR STATES STATUTES PERTAINING TO NARCOTIC DRUGS, MARIJUANA, DEPRESSANT OR STIMULANT DRUGS OR SUBSTANCES?

☐ NO ☐ YES → DATE OF FINAL CONVICTION

I CERTIFY THAT THE STATEMENTS BY ME ARE TRUE.

A. SIGNATURE

B. DATE

FAA INSPECTOR'S REPORT

I HAVE -

☐ EXAMINED THIS APPLICANT'S PAPERS.

☐ PERSONALLY TESTED THIS APPLICANT IN ACCORDANCE WITH PERTINENT PROCEDURES AND STANDARDS.

WITH THE INDICATED RESULT -

☐ APPROVED

☐ DISAPPROVED

PARACHUTE SEAL SYMBOL ASSIGNED _____

☐ ANSWER SHEET GRADED (Military Competency)

DATE	INSPECTOR'S SIGNATURE	FAA DISTRICT OFFICE
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