

Application form for STI (A) Certificate

issued under the Commission Regulation (EU) No 1178/2011 as amended



Transport Malta

Civil Aviation Directorate

Transport Malta-Civil Aviation Directorate, Malta Transport Centre, Pantar Road, Lija LJA 2021 Malta. Tel: +356 2555 5000 cadpel.tm@transport.gov.mt www.transport.gov.mt

WARNING TO ALL APPLICANTS – Any false statement, misrepresentation or concealment of material fact on this form or any document presented in support of this application may be grounds for criminal prosecution.

DATA PROTECTION NOTICE - All data collected in this form is processed in accordance with the Privacy Laws that include General Data Protection Regulation (Regulation 2016/679/EU) and Chapter 440 of the Laws of Malta (Data Protection Act). The data provided may be exchanged with other Public Authorities and/or Government Departments as required and permitted by Maltese Law. Transport Malta of Triq Pantar, Lija, Malta LJA2021 is the data controller for the purpose of the privacy laws. The Privacy Notice attached with this application sets out the way in which personal information/data is collected and processed by Transport Malta, as well as the steps that are taken to protect such information.

STI (A)

Licence Type /No:

To be completed by the applicant

Application for:

Initial STI(A) Certificate (Appendix 1) Revalidation of STI(A) Certificate (Appendix 2) Renewal of STI(A) Certificate (Appendix 3)

Extension to other FSTDs representing a further Type. Aeroplane type: _____
(Appendix 4)

Last and First Name: _____

Date of Birth dd/mm/yyyy: _____ Nationality: _____

Place and Country of Birth _____ Age: _____

email: _____

Address: _____

Telephone Number (Home): _____ (Mobile) _____

Class of Medical Certificate (if held): _____ Valid till Date: ____/____/____

I hold or have held a Licence: PPL(A) CPL(A) ATPL(A)

with instructor privileges FI IRI CRI TRI

Class or Type Rating: _____ Valid till: _____

STI(A) Certificate Valid until: ____/____/____

Signature of Applicant: _____ Date of Signature: _____

Application form for STI (A) Certificate

issued under the Commission Regulation (EU) No 1178/2011 as amended



Transport Malta

Civil Aviation Directorate

Transport Malta-Civil Aviation Directorate, Malta Transport Centre, Pantar Road, Lija LJA 2021 Malta. Tel: +356 2555 5000 cadpel.tm@transport.gov.mt www.transport.gov.mt

Appendix 1

Licence Type /No:

STI (A) – First Issue Application Form

To be completed by the applicant

Last and First Name: _____

STI(A) requested on the following type: _____

Application to instruct on BITDs only

1) I hold or have held a Licence: PPL(A) CPL(A) ATPL(A)

2) Proficiency check for the issue of the aeroplane type: _____ in an FSTD representing the class or type, within the 12 months preceding the application completed on date: _____

Note: An applicant for an STI(A) wishing to instruct on BITDs only, shall complete only the exercises appropriate for a skill test for the issue of a PPL(A) only;

Signature of applicant: _____ Date of Signature: _____

To be completed by Applicant and signed by examiner and applicant

Class/ Type of Aeroplane: _____ FSTD ID No: _____

1) Flight instruction under supervision of an FIE related to the duties of an STI in an FFS FTD 2/3 or FNPT II/III Hours: _____ (Minimum 3 hours)

or

Flight instruction under supervision of an FIE related to the duties of an STI in a BITD Hours: _____ (Minimum 3 hours)

Note: Applicants for an STI(A) wishing to instruct on a BITD only, shall complete the flight instruction on a BITD.

2) Assessment of Competence

Passed within the 12 months preceding the expiry date of the STI(H) certificate an assessment of competence as a STI(H) on Date : _____ with (Name of FIE) _____

(attach form TM/CAD xxx)

Signature of FIE: _____ Date of Signature: _____

Name of FIE: _____ Licence number: _____

Signature of applicant: _____ Date of Signature: _____

Application form for STI (A) Certificate

issued under the Commission Regulation (EU) No 1178/2011 as amended



Transport Malta

Civil Aviation Directorate

Transport Malta-Civil Aviation Directorate, Malta Transport Centre, Pantar Road, Lija LJA 2021 Malta. Tel: +356 2555 5000 cadpel.tm@transport.gov.mt www.transport.gov.mt

Appendix 2

Applicant's Full Name and Licence No:

STI (A) – Revalidation

Revalidation - To be completed by the applicant

Class/ Type of Aeroplane: _____ Simulator ID No: _____

Both (2) below must be completed in the last 12 months preceding the application:

1) I completed as an instructor as part of a complete CPL, IR, PPL or class or type rating course:

In an FFS or FNPT II/III or BITD Hours _____ *Minimum 3 hours*, within the 12 months preceding the expiry date of the STI certificate on Date: _____ *(Certificate required)*

2) Proficiency Check:

I passed in an FFS, FTD 2/3 or FNPT II/III on which flight instruction is conducted on Date: _____, the applicable sections of the proficiency check in accordance with Appendix 9 to this Part-FCL for the class or type of aircraft above, within the 12 months preceding the expiry date of the STI certificate. *(Certificate required)*

Note: For an STI(A) instructing on BITDs only, the proficiency check shall include only the exercises appropriate for a skill test for the issue of a PPL(A) only.

Signature of Applicant: _____ Date of Signature: _____

Application form for STI (A) Certificate

issued under the Commission Regulation (EU) No 1178/2011 as amended



Transport Malta

Civil Aviation Directorate

Transport Malta-Civil Aviation Directorate, Malta Transport Centre, Pantar Road, Lija LJA 2021 Malta. Tel: +356 2555 5000 cadpel.tm@transport.gov.mt www.transport.gov.mt

Appendix 3

Applicant's Full Name and Licence No:

STI (A) – Renewal

Renewal - To be completed by the Applicant

Class/ Type of Aeroplane: _____ Simulator ID No: _____

All three (3) below must be completed in the last 12 months preceding the application:

1) Refresher Training

I hereby declare that I, _____ completed refresher training as an STI, consisting of Technical Training Hours: _____ and Flight Instruction Hours: _____ on type: _____ using Simulator ID No.: _____ on Date: _____

(Certificate required)

2) Proficiency Check:

I passed in an FFS, FTD 2/3 or FNPT II/III on which flight instruction is conducted, the applicable sections of the proficiency check in accordance with Appendix 9 to Part-FCL for the class or type of aircraft above, within the 12 months preceding the expiry date of the STI certificate on Date: _____ (Certificate required)

Note: For an STI(A) instructing on BITDs only, the proficiency check shall include only the exercises appropriate for a skill test for the issue of a PPL(A) only.

3) I completed as an instructor as part of a complete CPL, IR, PPL or class or type rating course:

I hereby declare that I, _____ conducted flight instruction on a complete CPL, IR, PPL or class/ type rating course type: _____ under the supervision of an FI, CRI(A) IRI or TRI nominated by the ATO for this purpose, using Simulator ID No. _____ for Hours: _____ (Minimum 3 Hours), including flight instruction hours under the supervision of an FIE(A) for Hours: _____ (Minimum 1 Hour) on Date: _____.

Signature of Applicant: _____ Date of Signature: _____

To be completed by the ATO

Training conducted in: Aeroplane Type: _____ Simulator ID No.: _____

ATO Name: _____ Certificate number: _____

Name of Head of training _____

The applicant completed as an instructor as part of a complete CPL, IR, PPL or class/ type rating course:

Flight instruction on the appropriate Simulator Hours: _____ under the supervision of an FI/ CRI(A)/ IRI/ TRI* nominated by the ATO for this purpose

Name of Instructor: _____ Licence number of Instructor: _____

Flight instruction on the appropriate Simulator Hours: _____ under the supervision of an FIE nominated by the ATO for this purpose

Name of FIE: _____ Licence number FIE: _____

* delete as applicable

Signature of HT: _____ Date of Signature: _____

Appendix 4

Applicant's Full Name and Licence No:

STI (A) – Extension to other FSTDs

To be completed by the Applicant

New Aeroplane Type: _____

1) Simulator content of the relevant CRI / TRI course.

I hereby declare that I completed the FSTD content of the CRI or TRI course on the class/type _____, consisting of Hours: _____ (Minimum 5 hours) of flight instruction on a single-pilot aircraft, using FSTD ID No. _____.

2) Proficiency Check:

I passed in an FSTD on type: _____ the applicable sections of the proficiency check in accordance with Appendix 9 to this Part for the class/type of aircraft above, within the 12 months preceding the application date for the STI certificate on Date: _____ (Certificate required)

Signature of Applicant: _____ Date of Signature: _____

To be completed by Supervision Instructor and Supervising FIE

3) Flight instruction on a complete CRI, IR, PPL or a class or type rating course

Training conducted in: Aeroplane Type: _____ Simulator ID No.: _____

ATO Name: _____ Certificate number: _____

Name of Head of training _____

The applicant completed as an instructor as part of a complete CPL, IR, PPL or class/ type rating course:

Flight instruction on the appropriate Simulator Hours: _____ under the supervision of an FI/ CRI(A)/ IRI/ TRI* nominated by the ATO for this purpose

Name of Instructor: _____ Licence number of Instructor: _____

Flight instruction on the appropriate Simulator Hours: _____ under the supervision of an FIE nominated by the ATO for this purpose

Name of FIE: _____ Licence number FIE: _____

* delete as applicable

Signature of HT: _____ Date of Signature: _____

Application form for STI (A) Certificate

issued under the Commission Regulation (EU) No 1178/2011 as amended



Transport Malta

Civil Aviation Directorate

Transport Malta-Civil Aviation Directorate, Malta Transport Centre, Pantar Road, Lija LJA 2021 Malta. Tel: +356 2555 5000 cadpel.tm@transport.gov.mt www.transport.gov.mt

STI (A) Certificate Submission Instructions

Documents required:

1. A copy of the Malta ID Card (both sides) or Passport [Original has to be presented before licence is collected / Not required if the applicant already holds a Malta part FCL licence]
2. A copy of the Licence held
3. Log Book – All flight instruction must be signed by the instructor
4. Copy of Instructor Certificate if credit is given - *if applicable*
5. Copy of Medical Certificate – *if held*
6. Copy of ATO Approval Certificate if not issued by Transport Malta
7. Copy of other instructor certificate/s if credit is given - *if applicable*
8. STI Course Completion Certificate showing simulator time as applicable
9. Certificate of training completed for STI revalidation or renewal showing simulator time as applicable.
10. Copy of Examiner Certificate if not issued by Transport Malta
11. Copy of the Simulator Approval
12. Copy of last Proficiency Check

Office
Use
Only

①

②

③

④

⑤

⑥

⑦

⑧

⑨

⑩

⑪

⑫

It is important to send all the documents to avoid a delay in the issue of the rating.

Fee: The applicable fee in the Malta Air Navigation Order / Scheme of Charges on the Transport Malta website has to be submitted with the application.

Queries: If you need additional information send an email to cadpel.tm@transport.gov.mt

Attention: Personnel Licensing Section, Transport Malta Civil Aviation Directorate - giving your contact telephone number.

Send completed original form to:

Transport Malta-Civil Aviation Directorate, Malta Transport Centre, Pantar Road, Lija LJA 2021 Malta.

Application form for STI (A) Certificate

issued under the Commission Regulation (EU) No 1178/2011 as amended



Transport Malta

Civil Aviation Directorate

Transport Malta-Civil Aviation Directorate, Malta Transport Centre, Pantar Road, Lija LJA 2021 Malta. Tel: +356 2555 5000 cadpel.tm@transport.gov.mt www.transport.gov.mt

Data Protection Privacy Notice

Transport Malta of Triq Pantar, Lija, Malta LJA2021 is the Data Controller for the purpose of the Data Protection Act CAP. 440 and General Data Protection Regulation (EU) (GDPR) 2016/679. This Privacy Notice sets out the way in which we collect and process your Personal Information, as well as the steps we take to protect such information.

1. The information we collect and how we use it

- 1.1. From this application form Transport Malta collects different types of information which information is that required by Law and is used explicitly for your particular application. It is to be noted that if the required information is not provided the said application cannot be processed.
- 1.2. The primary purpose for collecting information is mainly to process the application for the service being applied for, however, your personal information may also be used for related purposes that amongst other include: sending notifications, renewal of licence/certificate after expiry period, and for the provision of information with regards to any legislative amendments which may affect the services offered to you.

2. To whom we disclose information

- 2.1. This information will be solely used for the reasons detailed above. However there may be cases where personal information is shared with the following third parties for reasons listed below:
 - Any third party offering assistance in providing the required service;
 - Any law enforcement body who may have any reasonable requirement to access your personal information;
 - Third party entities responsible for the data processing contracted by Transport Malta.

3. Data Subject Rights

- 3.1. With respect to your privacy rights, Transport Malta is obliged to provide you with reasonable access to the Personal Data that you have provided to us. Your other principal rights under data protection law are:
 - a. the right for information;
 - b. the right to access;
 - c. the right to rectification;
 - d. the right to erasure;
 - e. the right to restrict processing;
 - f. the right to object to processing;
 - g. the right to data portability;
 - h. the right to complain to a supervisory authority; and
 - i. the right to withdraw consent.
- 3.2. If you wish to access or amend any Personal Data we hold about you, or to request that we delete any information about you, you may contact us by sending a request to dataprotection.tm@transport.gov.mt. We will acknowledge your request within seventy-two (72) hours and will do our utmost to handle it promptly. We will respond to these requests within a month, with a possibility to extend this period for particularly complex requests in accordance with Applicable Law.
- 3.3. At any time, you may object to the processing of your Personal Data, on legitimate grounds, except if otherwise permitted by applicable law.
- 3.4. In accordance with Applicable Law, we reserve the right to withhold personal data if disclosing it would adversely affect the rights and freedoms of others. Moreover, we reserve the right to charge a fee for complying with such requests if they are deemed manifestly unfounded or excessive.

4. Retention period

- 4.1. Personal data will be retained for not more than 3 months from date of application should the application not be submitted complete or is rejected.
- 4.2. Once the service related to your application is provided, we will retain your information for as long as needed to provide you with our service, or to comply with our legal obligations, resolve disputes and enforce our agreements.

5. Security

- 5.1. We take appropriate security measures to protect against loss, misuse and unauthorized access, alteration, disclosure, or destruction of your information. Additionally, steps will also be taken to ensure the ongoing confidentiality, integrity, availability, and resilience of systems and services processing personal information, and will restore the availability and access to information in a timely manner in the event of a physical or technical incident. All information gathered is kept confidential and is used solely for the purpose indicated herein.
- 5.2. If we learn of a security systems breach, we will inform you of the occurrence of the breach in accordance with applicable law.

6. Governing Law

All data collected in this form is processed in accordance with the Privacy Laws that include General Data Protection Regulation (Regulation 2016/679/EU) and Chapter 440 of the Laws of Malta (Data Protection Act).

7. Data Protection Officer

- 7.1. Transport Malta has a Data Protection Officer ("DPO") who is responsible for matters relating to privacy and data protection. The DPO can be reached at the above address or by email: dataprotection.tm@transport.gov.mt

8. Contacting us

- 8.1. Please address any questions, comments and requests regarding the application process to cadpel.tm@transport.gov.mt