



Application for revalidation and renewal of FI/CRI/IRI (A)/(H) Certificate

FOR-0185
4.6.2021
2.0
LF-255

A – Supporting Documents

The following shall be attached to the application, mark in the appropriate box

<input type="checkbox"/> Confirmation of refresher course	<input type="checkbox"/> Copy of a valid medical certificate	<input type="checkbox"/> Assessment documents (LF-260)
<input type="checkbox"/> Logbook (filled & signed)	<input type="checkbox"/> Licence*	

*Licence shall be submitted with the application. A copy of the licence is sufficient if the original is submitted when the new license is received.

B – Applicant Details

Full name		Date of Birth
Permanent address and postcode		Licence No.
Training Organisation (ATO)	E-mail address	Telephone/mobile

C – Privileges

Held Mark as appropriate

Flight instructor (FI)		Instrument Rating instructor (IRI)
<input type="checkbox"/> LAPL / PPL	<input type="checkbox"/> Instrument	<input type="checkbox"/> Single engine
<input type="checkbox"/> Single engine	<input type="checkbox"/> FI Instructor	<input type="checkbox"/> Multi engine
<input type="checkbox"/> Night	<input type="checkbox"/> Aerobatic	Class Rating instructor (CRI)
<input type="checkbox"/> CPL	<input type="checkbox"/> Towing	<input type="checkbox"/> Single engine
<input type="checkbox"/> Multi engine		<input type="checkbox"/> Multi engine

D – Flight Experience in Hours

Total flight time on relevant A/C category:	Hours of flight instruction in relevant A/C category:
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E – Conditions for Revalidation FI/IRI

Mark as appropriate

For revalidation of FI/IRI the applicant shall fulfil **two** of the following three requirements preceding the expiry of the certificate:*

- Completed at least 50 hours of flight instruction in the appropriate a/c category during the period of validity of the certificate as, FI, TRI, CRI, IRI, or examiner
- For revalidation of FI IR/IRI 10 hours instruction for IR within the last 12 months preceding the expiry date of the certificate
- Complete instructor refresher training for the privileges being revalidated (attach confirmation)
- Pass an assessment of competence in accordance with FCL.935 within the 12 months preceding the expiry date of the certificate

*An Assessment of competence is required for at least each alternative revalidation

F – Conditions for Revalidation CRI

Mark as appropriate

For revalidation of CRI the applicant shall fulfil **one** of the following three requirements within 12 months preceding the expiry of the certificate:*

- 10 hours of flight instruction in the role of CRI. (If applicant holds CRI privileges on both SE and ME aeroplane, 5 hrs. of flight instruction shall be on both classes)
- Complete instructor refresher training for the privileges being revalidated (attach confirmation)
- Pass an assessment of competence in accordance with FCL.935 for multi-engine or single-engine aeroplane, as relevant.

*An Assessment of competence is required for at least each alternative revalidation

G – Conditions for Renewal of Lapsed FI/IRI/CRI Certificate

Mark as appropriate

For renewal of FI/IRI/CRI the applicant shall within 12 months preceding the renewal

- Complete an individual training programme – Please complete **section H** of application form with details of refresher training required for renewal of lapsed FI/IRI/CRI certificate.
- Pass an assessment of competence in accordance with FCL.935

H – Details of individual training programme (only for renewal)

Training details:

Head of Training signature and date:

I – Signature

I, the applicant, hereby declare that I do not hold or have applied for the privileges applied for on this application in another member state, nor have I had my privileges revoked or suspended in another member state. I confirm that information given on this form is correct and that I have not withheld any relevant information or made any misleading statements. I understand that, if I have made any false or misleading statements in connection with this application, the licensing authority may refuse to grant me or may revoke privileges applied for or already held, without prejudice to any other action applicable under national law.

With this request (application/form) and my signature, I consent to the processing and control of the submitted information. The Icelandic Transport Authority will use the information in accordance with applicable laws and regulations on the processing of personal data.

Place and Date	Applicant's signature
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