

# BRITISH GLIDING ASSOCIATION

## APPLICATION TO THE CAA FOR THE GRANT OF A PART-SFCL SENIOR EXAMINER (SAILPLANES) CERTIFICATE (INITIAL ISSUE, REVALIDATION OR RENEWAL)

Please read the guidance notes, complete the form in clear block capitals, and use the attached payment information.

### Data protection notice

On receipt, the BGA protects the personal data supplied in this application form in accordance with its data protection policies, notices and procedures. The details, including your rights in respect of your data held by us, are at <https://members.gliding.co.uk/library/data/>

### FALSE REPRESENTATION STATEMENT

It is an offence under the Air Navigation Order to make, with intent to deceive, any false representation for the purpose of procuring the grant, issue, renewal or variation of any certificate, licence, approval, permission or other document. This offence is punishable on summary conviction by a fine and on conviction on indictment with an unlimited fine or imprisonment or both.

### 1. APPLICANT'S PERSONAL PARTICULARS (please complete as legibly as possible)

**CAA Reference Number** (If known. Individuals who have held or hold a CAA licence and/or CAA Medical Certificate may know this number)

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|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|

Title.....Surname.....

Forenames.....Nationality.....

Date of Birth.....Town of Birth.....

Permanent Address.....

.....Post Code.....

Email Address (please print carefully).....

Tel No.....Mobile No.....

BGA Club .....

### 2. ADDRESS FOR CORRESPONDENCE (if different from above)

Postal Address.....

.....Post Code.....

### 3. APPLICANT REQUIREMENT

(please refer to the guidance notes before ticking boxes)

Senior Examiner (Sailplanes)

Initial-issue application ☐ Revalidation application ☐ Renewal application ☐

Current SE(S) certificate expiry date:

Current FE(S) certificate expiry date:

### 4. SENIOR EXAMINER BRIEFING, COURSE OR SEMINAR COMPLETION STATEMENT (AMC1 SFCL.445)

I certify that (name):

has satisfactorily completed the required briefing, course or seminar for Senior Examiner (Sailplanes) privileges on (date):

Supervising CAA staff examiner or SE(S) name:

Signature:

CAA reference number:

Date:

BGA Stamp:

BGA Signature:

### 5. APPLICANT DECLARATION

I declare that I have not been subject to any sanctions, including the suspension, limitation or revocation of any of my licences, ratings or certificates issued in accordance with SFCL, FCL or BFCL for non-compliance with Regulation (EU) 2018/1139 and its delegated and implementing acts during the past three years.

I declare that the information supplied in this application is accurate.

Applicant signature.....

Date.....

## APPLICATION GUIDANCE NOTES

All applicants must complete sections 1, 2, 3 and 5. Additionally:

Supervising CAA staff examiner or SE(S) must complete section 4.

Please enclose with this completed application:

- a certified colour copy of the applicants passport / ID (for options see CAA website 'proof of identity')
- a copy of the applicants SPL

Please submit the correct payment (the application cannot progress without payment)

**CERTIFYING DOCUMENTS.** The following people can act as document certifiers where required in this application; Club Chairman, CFI or Secretary, CAA authorised Examiner. Insert on the copy to be enclosed with the application, '*I have seen the original document and I certify that this is a complete and accurate copy of the original*', certifier must sign and date, certifiers name must be printed in block capitals. Must include position or capacity, eg. *Club Secretary*.

## BGA USE ONLY - BGA DECLARATION

We are satisfied that the application for the grant of a Senior Examiner (Sailplanes) certificate for the person named on this application has been assessed and we are satisfied that all the requirements have been satisfactorily completed. We hereby recommend that the Senior Examiner (Sailplanes) certificate is issued.

Name ..... Signature.....

Position..... Date.....

## CAA USE ONLY

Date of Issue.....

Loaded by.....

Checked by.....

Signed by.....

Enclosures:

**PAYMENT** (please note that payment/credit card details are destroyed following payment)

All fees are payable to the BGA with the application. Current fees are on the BGA website  
<http://www.gliding.co.uk/forms/bgafees.pdf>

Please enter the amount you are paying here.....

**Pay by bank transfer:** Please include your surname in the reference.

British Gliding Association  
00041622  
30-94-97

IBAN GB25 LOYD 3094 9700 041622 BIC LOYDGB21029

**Pay by cheque:** Cheques payable to The British Gliding Association.

**Pay by debit or credit-card:** Call the BGA office on 0116 289 2956.

**Coming soon:** Secure online payment.

Submit the completed application form, certified copies of documents and payment to:

British Gliding Association  
8 Merus Court  
Meridian Business Park  
Leicester LE19 1RJ

Or email to [office@gliding.co.uk](mailto:office@gliding.co.uk)