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Postal address:	Private Bag X12003, Aussspannplatz, Windhoek, NAMIBIA	E-mail	licensing@ncaa.na

NOTIFICATION OF AIRCRAFT DIFFERENCES & FAMILIARISATION TRAINING

PART 1: TO BE COMPLETED BY PILOT

Surname(Mr/Mrs/Miss) (Block letters)			
First names			
Identity/Passport Number		Date of birth	
Telephone Number		Mobile phone Number	
NCAA License number:		Email address	

TRAINING DETAILS

Place:		Date of last training flight:		Training received:	Differences		Familiarisation		Flying hours	
Trained as:	Pilot in command	Pilot instructor		Co-pilot		Co-pilot restricted		Other:		

AIRCRAFT DETAILS

Aircraft Model & Type:			Aircraft Registration:			MCM (Kg)		
Aircraft Systems:	Variable pitch propeller		Retractable undercarriage		Turbo/super charged engine		Pressurised cabin	Tail wheel aircraft

I herewith certify that the information submitted to NCAA is correct.

Signature of Pilot		Date:	
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PART 2: TO BE FILLED OUT BY INSTRUCTOR OR DESIGNATED EXAMINER

I, the undersigned certify that the applicant: <i>i.</i> has undergone the training specified in the NAMCATS and has performed satisfactorily; and <i>ii.</i> is competent to fly this aircraft safely.			
Name of Aviation Training Organisation OR Operator		Name of instructor/DE (Block letters)	
Telephone		Licence number	
Email address		Signature of Instructor/DE	
Date:		Grade (I/II)	

OFFICIAL USE ONLY

Date: Application reviewed		Application	Approved	Date:	Rejected	Date:
NCAA employee Name:		NCAA Supervisor Name:			Reason:	
Signature:		Signature:				