



# APPLICATION FORM

Post or fax this application form together with the accompanying documents to:

The Registrar  
ASIA PACIFIC FLIGHT TRAINING  
Suite 50-5-5, 5th Floor, Wisma UOA Damansara  
50, Jalan Dungun, Damansara Heights  
50490 Kuala Lumpur, Malaysia.  
Tel: +603-2092 3177 Fax: +603-2093 9218

## 1. TRAINING PROGRAMME

Please tick ✓ the selected programme



### FIXED-WING

- Private Pilot Licence (PPL)
- Integrated Course Inclusive of PPL, CPL/IR & ATPL (Frozen).



### HELICOPTER

- Private Pilot Licence (PPL)
- Commercial Pilot Licence (CPL)

## 2. DOCUMENTS REQUIRED

- Letter of Approval from the Department of Civil Aviation (DCA) Malaysia.
- Certified true copies of academic qualifications (especially SPM, O Level or equivalent).
- Certified true copies of MyKad or Passport (for non-Malaysian citizens).
- Medical Certificate (Class II for PPL Course and Class I for CPL/IR and ATPL) from a DCA approved medical practitioner.\*
- 10 passport sized non-returnable colour photographs.\*

\* after receiving APFT's Letter of Offer for the course.

## 3. PERSONAL PARTICULARS

Name: .....	Nationality: .....
MyKad/Passport No: .....	Date of Birth: .....
Marital Status: <input type="radio"/> Single <input type="radio"/> Married	Gender: <input type="radio"/> Male <input type="radio"/> Female
Mailing Address: .....	Telephone No: .....
.....	Home: .....
.....	Mobile: .....
.....	E-Mail: .....

## 4. PARTICULARS OF PARENTS

Father/Guardian

Mother/Guardian

Name: .....	.....
MyKad/Passport No: .....	.....
Address: .....	.....
.....	.....
Telephone No: .....	.....
Profession: .....	.....
Relationship to Applicant: .....	.....



### 5. SPM EXAMINATION RESULTS or 'O' Level or its equivalent

Subjects	Grades	Subjects	Grades
Bahasa Malaysia	.....	.....	.....
English	.....	.....	.....
Mathematics	.....	.....	.....
Additional Mathematics	.....	.....	.....
Physics	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
Other qualifications (Diploma, Degree): .....			

### 6. FLYING EXPERIENCE

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### 7. PHYSICAL REQUIREMENTS

**Eyesight:**

- Good eyesight (visual acuity of at least 6/60 without optical aid, correctable to 6/6)
- Not colour blind

**Height (cm):** .....

**Weight (kg):** .....

### 8. ARRANGEMENT FOR SETTLEMENT OF COURSE FEES

Self-financing

From finance agency/organisation/bank: .....

Other sponsorship: .....

*Please tick ✓ if applicable*

### 9. DECLARATION

**I declare that the information given by me is true and accurate. I am further aware that drug abuse is a serious offence and against the APFT regulations.**

Applicant's Signature: .....

Date: .....