



NOMINATION OF A FLIGHT INSTRUCTOR RESPONSIBLE OF THE SATELLITE BASE AT: _____

COMPLETED BY FLIGHT TRAINING UNIT

Flight Training Unit (FTU):		Hours of Flight Training Operations:
Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/>	Name of the Flight Instructor responsible of the satellite:	Work Hours of the CFI at the satellite base:
Aircraft category : <input type="checkbox"/> Aeroplane <input type="checkbox"/> Helicopter	Licence number of the responsible Flight Instructor:	Flight Instructor rating Class : <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 AND expiry date:
Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/>	Name of the Chief Flight Instructor (CFI) appointed at main base, <u>responsible of the instructor at the satellite base</u> : (if different):	Chief Flight Instructor rating Class : (if different): <input type="checkbox"/> 1 <input type="checkbox"/> 2 AND expiry date:

The above-mentioned candidate is appointed as Flight Instructor responsible of the satellite base, under supervision of the Chief-Flight Instructor (CFI), in accordance with articles 406.58 and 406.21(1) of the Canadian Aviation Regulations.

I certify that the appointed Flight Instructor is skilful and has the qualifications required for this position at this satellite base. Furthermore, the Chief-Flight Instructor (CFI) accepts the responsibility of the flight training supervision at this satellite base in accordance with CARs 426.11, 406.22 and 426.22. The Chief Flight Instructor is employed on a **full-time** basis during flight training operations in accordance with CARs 426.11(1)(c)(ii) and NO Flight Instructor Class 4 will give flight training in this satellite base unless a competent Flight Instructor Class 1 or 2 is on duty at this base (Ref.: CAR 406.58 (2)).

Name of President or the Manager Flight Operations (in block letters):	Signatory Title :
Signature:	Date:

COMPLETED BY CHIEF FLIGHT INSTRUCTOR (CFI)

In accordance with CARs 426.11 (3) and 406.58, I hereby declare having the qualifications required to act as a CFI and accept the responsibility of flight training supervision give at this satellite base. I further acknowledge that I know, accept and will carry out the responsibilities of the position, as set out in CARs 426.22.

Signature of the Chief Flight Instructor:	Date:
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COMPLETED BY FLIGHT INSTRUCTOR RESPONSIBLE OF THE SATELLITE BASE

In accordance with the *Canadian Aviation Regulations 426.11 and 406.58*, I declare having the qualifications to act as a responsible Flight Instructor in this satellite base (**personal resume enclosed**) and accept to be responsible of its operation and flight training. I further acknowledge that I know, accept and will carry out responsibilities of the position in conformity with the Canadian Aviation Regulations, Acts and established procedures.

Signature of the Flight Instructor Responsible of the satellite base:	Date:
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