

APPLICATION FOR AUTHORITY TO WEAR CADET WINGS

A					
	Service Number	Last Name	Initials	Rank	Unit

B	<p>I certify that I have met the Transport Canada regulation for licensing as a _____ pilot. My licence number is _____ and was issued _____ (date).</p>			
			<p>Note: You must submit a copy of your licence with this application.</p>	
	Date	Signature of Applicant		

C	<p>I have reviewed this applicant's licence. I certify that he/she is actively participating in the Air Cadet Familiarization Flying Program as a pilot.</p>			
			<p>Note: You must include a certified true copy of the applicant's licence.</p>	
	Date	Signature of Commanding Officer		

D	<p><input type="checkbox"/> Recommended <input type="checkbox"/> Not Recommended</p>			
	Date	Signature of SO2 Air		

E	<p><input type="checkbox"/> Recommended <input type="checkbox"/> Not Recommended</p>			
	Date	Signature of RCA Ops O		

F	<p><input type="checkbox"/> Approved <input type="checkbox"/> Not Approved</p>			
	Date	Signature of CO RCSU (Pac)		