



Form No: RPPL.F.180

Version No:16

Issue Date: 28/02/2024

SAFETY REGULATION DIVISION
POLICY AND PROCEDURES

Title: APPLICATION FORM FOR THE INITIAL ISSUE, REVALIDATION, RENEWAL AND/OR EXCHANGE OF STUDENT AND AIR TRAFFIC CONTROLLER LICENCES, RATINGS AND ENDORSEMENTS

Instructions on how to fill out this form, with payment methods, are on page 5.

Part A: APPLICANT'S DETAILS**Name: (Print)**Note; If your name e.g. surname* has changed from a previous application please tick to indicate a change.
(*include copy of marriage cert)Changed since last applied? Yes **Permanent home address: (Print)**

Note; If your address information has changed from a previous application please tick to indicate a change

Changed since last applied? Yes

Date of birth:

Contact details

Place of birth (Country):

E- mail address:

Nationality:

Tel/ Mobile:

Note - If the licence is to be posted to a different address than the one above (e.g. the ANSP where the licence holder works) please fill in hereunder

Name of Contact person (Print):

Address details (Print):

ATCO Licence Number:

IRL/AC/

Student Licence Number:

IRL/AC/

Member State Licence exchange:

Licence number:

Part B: APPLICATION FOR (Where the applicant already holds an ATCO licence, please tick only those boxes relating to the ratings and/or endorsements which have changed. All other entries on a licence, which are within their period of validity, will be transferred automatically.)

- Issue of Student ATCO Licence, rating(s) and rating endorsements) (fill in Part A, B, C, D and F of this form)
- Licence endorsement(s) (Language/Assessor/OJTI/STDI) (fill in Part A, B, C (2), D and F of this form)
- Issue of ATCO Licence, rating(s) and rating endorsement(s) (fill in Part A, B, C, D, E and F of this form)
- Revalidation of ATCO Licence rating, endorsements (fill in Part A, B, C, D, E and F of this form)
- Renewal of ATCO Licence rating, endorsements (fill in Part A, B, C, D, E and F of this form)
- Exchange of ATCO or Student Licence, rating, endorsements (fill in Part A, B, C, D and F of this form)



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Part C (1): RATING / ENDORSEMENT / UNIT SECTOR or WORKING POSITION: (Insert where required and tick only the relevant boxes. **Student licence applicants need only tick relevant Rating and Endorsement boxes**)

RATING	RATING ENDORSEMENT	UNIT	
<input type="checkbox"/> ADI Aerodrome Control Instrument <input type="checkbox"/> ADV Aerodrome Control Visual	<input type="checkbox"/> TWR–Tower Control <i>(Where the applicant is applying for AIR and Ground Movement Control (GMC).(see ¹note)</i> <input type="checkbox"/> AIR–Air Control <i>(where the applicant is applying for AIR Control but not Ground Movement Control (GMC).</i> <input type="checkbox"/> GMC–Ground Movement Control <i>(where the applicant is applying for Ground Movement Control (GMC) but not AIR Control)</i> <input type="checkbox"/> GMS - Ground Movement Surveillance <i>(Granted in addition to the GMC or TWR Control endorsement)</i> <input type="checkbox"/> RAD -Aerodrome Radar <i>(Granted in addition to the AIR or TWR Control endorsement)</i>	<input type="checkbox"/> EIDW <input type="checkbox"/> EICK <input type="checkbox"/> EINN	<input type="checkbox"/> EIDL <input type="checkbox"/> EIKN <input type="checkbox"/> EIKY <input type="checkbox"/> EISG <input type="checkbox"/> EIWF <input type="checkbox"/> EIWT

¹Note; When AIR and GMC is provided from one operational position this shall be indicated on the ATC licence by a TWR endorsement to the ADI rating. The TWR endorsement entitles the holder of that rating endorsement to either provide aerodrome control from one working position or to provide AIR or GMC separately. Where alignment of AIR & GMC revalidation dates is necessary for the TWR endorsement, the aligned revalidation date will be the date of the unit endorsement which is first to expire.

<input type="checkbox"/> APP Approach Control Procedural	<input type="checkbox"/> EIDL <input type="checkbox"/> EIKN <input type="checkbox"/> EIKY <input type="checkbox"/> EISG <input type="checkbox"/> EIWF
<input type="checkbox"/> APS <input type="checkbox"/> TCL² Approach Control Surveillance	<input type="checkbox"/> EIDW <input type="checkbox"/> EICK <input type="checkbox"/> EINN
<input type="checkbox"/> ACS <input type="checkbox"/> TCL² Area Control Surveillance	<input type="checkbox"/> EIDW <input type="checkbox"/> EINN UAC <input type="checkbox"/> EINN LAC
² note; As there are no TCL approved unit courses, TCL should only be ticked if successfully completed during initial training.	<input type="checkbox"/> EINN HAL³ (tick if combining high and Low) ³ note; The aligned revalidation date will be the date of the unit endorsement which is first to expire.

Part C (2): Licence endorsements (OJT/STDI /Assessor) (Language) (Tick the relevant boxes)

	OJT/	STDI	ASSESSOR	English Language Proficiency
First Issue	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Level 4 <input type="checkbox"/>
Renewal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Level 5 <input type="checkbox"/>
Revalidation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Level 6 <input type="checkbox"/>



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Part D: Declaration by Applicant.

I hereby:

1. apply for the issue/revalidation/renewal/exchange of an ATCO/Student licence, ratings/endorsements, unit rating/endorsements and/or licence endorsements as indicated by the boxes ticked on this application form;
2. confirm that the information contained herein is correct at the time of the application;
3. confirm that I am not holding an ATCO (or Student) Licence issued in another Member State (except for exchange);
4. confirm that I have not applied for an ATCO (or Student) Licence in another Member State (except for exchange); and
5. confirm that I have never held an ATCO (or Student) Licence issued in another Member State which has been revoked or suspended in any other Member State.

I understand that it is an offence obtain a licence, rating, endorsement or certificate by falsification of submitted documentary evidence (ATCO.AR.D.005 refers).

Print Name:

Date:

Signature:

Part E: Declaration by responsible position holder authorised by an ANSP (tick as appropriate)

For a new unit/sector rating and/or rating endorsement (under UTP):

The applicant has completed training as per the Unit Training Plan (UTP) and successfully passed the appropriate examinations and assessments relevant to the Unit rating, and where applicable Unit rating endorsement, and in accordance with the requirements of Commission Regulation (EU) 2015 / 340.

For revalidation or renewal of a unit/sector rating and/or rating endorsement (under UCS):

The applicant **(1)** has been exercising the privileges of the licence for a minimum number of hours as defined in the unit competence scheme; **and (2)** has undertaken refresher training within the validity period of the unit endorsement according to the unit competence scheme; **and (3)** has had their competence assessed and they meet the requirements of Commission Regulation (EU) 2015 / 340 and the Unit Competence Scheme (UCS).

I understand that any incorrect information provided herein could prohibit a (Student) ATCO from holding a (Student) ATCO Licence.

Print Name:

Date:

Signature:

Part F: Certificates/Documents

Please enclose all relevant certificates and/or documents and tick as appropriate to indicate included with application form:

- | | |
|--|---|
| 1. Copy of Student ATCO Licence, if applicable <input type="checkbox"/> | 7. Copy of relevant training certificate/assessment documents proving the successful completion of: |
| 2. Copy of passport or other national ID, if not previously submitted <input type="checkbox"/> | (a) Initial training (integrated certificate) <input type="checkbox"/> |
| 3. Copy of medical certificate: <input type="checkbox"/> | (b) Unit training <input type="checkbox"/> |
| 4. Copy of language proficiency certificate(s): <input type="checkbox"/> | (c) OJTI instructor training <input type="checkbox"/> |
| 5. Copy of competence assessment form: <input type="checkbox"/> | (d) STDI instructor training <input type="checkbox"/> |
| 6. Exchange of licence; <input type="checkbox"/> | (e) Assessor training <input type="checkbox"/> |
| i. RPPL-F-180A Verification of ATC license and request to transfer associated medical records <input type="checkbox"/> | (f) Refresher training <input type="checkbox"/> |



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Instructions

1. Read the form thoroughly and complete the appropriate Parts only (see Part B for guidance). Where the applicant already holds an ATCO licence, please tick only those boxes relating to the ratings and/or endorsements which have changed. All other entries on a licence, which are within their period of validity, will be transferred automatically.
2. Complete by typing in the blank fields and tick boxes where indicated.
3. All submissions are required to be signed by the individual applicant at Part D. Where appropriate the responsible person of an organisation is required to sign at Part E.
4. Ensure correct certificates/documents accompany this application and Part F is ticked appropriately.
5. For exchange of Member State licence, the following is also required: SRD RPPL-F-180A form 'Verification of ATC license' and request to transfer associated medical records. SRD may require a confirmation letter from an ANSP of Unit training offer.
6. Submit this form and certificates/documents either electronically to atc.licensing@iaa.ie or by post to the address at Part 'Contact Details' hereafter.
7. When making payment please fill in the Part 'Payment Details' on this page. If an applicant is not using the Part 'Payment Details', then only page 1 to 3 of this application form is required to be submitted.
8. The administration process requires 15 working days from receipt of a completed application form with the correct documentation. This period may take longer if the application form has been filled in incorrectly and/or the full documentation to accompany the application has not been submitted or is incorrect.

Payment details *(Full details of fees charged/ levied by the IAA are published in the IAA Fees Order)*

I am paying by:- DEBIT CARD CREDIT CARD

- PLEASE DO NOT SEND CASH -

Please note that we do not accept AMERICAN EXPRESS or DINERS CARD.

If paying by credit or debit card, please complete the information required below (in block capitals).

Note: All card details are destroyed upon completion of the transaction.

Name of Card holder (as stated on the card):

Card Number: Expiry date:

Security Code (last 3 digits on signature strip on reverse of card) ;

Contact Details *(When completed send this form and accompanying certificates / documents to)*

IAA Licensing Dept.
The Times Building,
11-12 D'Olier St,
Dublin 2
D02 T449
Ireland

Telephone: +353 (0)16031500

E-mail: atc.licensing@iaa.ie