

Royal Jordanian Air Academy APPLICATION FOR EXAMINATION To: Royal Jordanian Air Academy

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APPLICANT'S PERSONAL DATA Please Complete in Capital Letters Only.															
Surname:															
Name:															
*Date of Birth: *Date format plz. dd/mm/yyyy															
Place of Birth:															
Employer (if any):															
Tel. Number:															
Email:															
Address:															
Please accept my participation in the modular exams for the initial / extension of my AML – TICK $$:															
B1.1			B2												
Basic Knowledge Examinations in Module/s: TICK√															
Module	01	02	03	04	05	06	07	08	09A	10	11A	13	14	15	17A
MCQ															
EQ															
 If partial credits as per 66.25 (b) have been granted by a competent authority please attach a copy of the Credit Report. 															
2) In case of re-examination please take into consideration that a minimum of 90 days must have elapsed since the date you failed the module, or 30 days if you have attended retraining by a Part-147 organization.															
I do declare that the above data are correct, that I meet the requirements of Part-66 and Part-147 for my															
participation in the examinations, and that I have not been banned from taking part in any such examinations.															
	Signature:														
e.g. a.a. o															
Data:															
	Date: Passport attached Tick														

Form RJ-08Issue 02Rev. 01Date July 2018