

‘AMC and GM to Part-FCL — Issue 1, Amendment 11’

The Annex to ED Decision 2011/016/R is amended as follows:

The text of the amendment is arranged to show deleted text, new or amended text as shown below:

- (a) deleted text is ~~struck through~~;
- (b) new or amended text is highlighted in **blue**;
- (c) an ellipsis (...) indicates that the remaining text is unchanged.

GM1 FCL.740(b) Validity and renewal of class and type ratings

RENEWAL OF CLASS AND TYPE RATINGS: REFRESHER TRAINING AT AN AOC HOLDER

It is recommended that an AOC holder approved for renewal of type ratings under Part-ORO may provide refresher training if the applicant is enrolled in the EBT programme; and if the rating has lapsed by no more than 1 year.

If the rating has lapsed by more than 1 year, it is recommended that the applicant consider to follow the training at an ATO and AMC1 FCL.740(b) applies.

AMC1 FCL.1030(b)(3) Conduct of skill tests, proficiency checks and assessments of competence

OBLIGATIONS FOR EXAMINERS APPLICATION AND REPORT FORMS

[...]

- (b) For training, skill tests or proficiency checks for ATPL, MPL or class and type ratings, in AMC1 to Appendix 9;
- (c) For EBT practical assessment, in AMC1 to Appendix 10;
- (d) ~~(c)~~ For assessments of competence for instructors, in AMC5 FCL.935;

[...]

GM1 FCL.1030(b)(3)(ii) Conduct of skill tests, proficiency checks and assessments of competence

REVALIDATION OF CLASS AND TYPE RATINGS — AEROPLANES — REQUIRED MANOEUVRES AND EXERCISES IN THE CONTEXT OF APPENDIX 10 (EBT PRACTICAL ASSESSMENT)

The confirmation that all the required manoeuvres and exercises have been completed means that during the period of validity of the type rating, the applicant has completed the operator's EBT programme applicable to that period.

AMC1 to Appendix 10 — Revalidation and renewal of type ratings, and revalidation and renewal of IRs when combined with the revalidation or renewal of type ratings — EBT practical assessment

APPLICATION AND REPORT FORM — ADMINISTRATIVE PROCEDURES RELATED TO TYPE RATINGS

- (a) Minimum information provided in the form for Appendix 10.

Applicant's last name(s):	Applicant's first name(s):
Signature of applicant:	State of licence issue:
Type of licence held:	Licence number:
Type rating:	FSTD (aircraft type):

EBT module 1	Session 1.....Name of the instructor: _____ Type and number of licence: _____ Location, date and time: _____ FSTD ID code: _____
	Session 2.....Name of the instructor: _____ Type and number of licence: _____ Location, date and time: _____ FSTD ID code: _____
	Session X.....Name of the instructor: _____ Type and number of licence: _____ Location, date and time: _____ FSTD ID code: _____
	Completion of the module: _____ <input type="checkbox"/> _____ date / signature (EBT manager)
EBT module 2	Session 1.....Name of the instructor: _____ Type and number of licence: _____ Location, date and time: _____ FSTD ID code: _____
	Session 2.....Name of the instructor: _____ Type and number of licence: _____ Location, date and time: _____ FSTD ID code: _____
	Session X.....Name of the instructor: _____ Type and number of licence: _____ Location, date and time: _____ FSTD ID code: _____
	Completion of the module: _____ <input type="checkbox"/> _____ date / signature (EBT manager)
	(...)
EBT module X	Session X.....Name of the instructor: _____ Type and number of licence: _____ Location, date and time: _____ FSTD ID code: _____
	Session Y.....Name of the instructor: _____ Type and number of licence: _____ Location, date and time: _____ FSTD ID code: _____
	Session Z.....Name of the instructor: _____ Type and number of licence: _____ Location, date and time: _____ FSTD ID code: _____
	Completion of the module: _____ <input type="checkbox"/> _____ date / signature (EBT manager)
Completion of the operator's EBT programme _____ from ____ (date) to ____ (date) <input type="checkbox"/> _____ date / signature (EBT manager)	
Name(s) in capital letters: _____ Signature of examiner (EBT manager) _____ Type and number of licence: _____ Examiner certificate number: _____ Date of applicant's licence endorsement: _____	
Delegation of signature for licence endorsement (instructor)	
Name: _____ Signature _____ Position in the operator: _____ Date: _____	

(b) AOC declaration for revalidation and renewal under the EBT programme for the purpose of AMC1 ARA.GEN.315(a) point (d) and for the purpose of point 1(a) of Appendix 10.

I confirm all of the following:

The EBT manager holds a current type rating examiner certificate in the type rating filled in in Appendix 10 (copy to be attached);	YES <input type="checkbox"/>
The instructor(s) that conducted the training to the applicant has (have) been standardised.	YES <input type="checkbox"/>
The EBT operator has performed a verification of the grading system at least once in the last 3 years.	YES <input type="checkbox"/>
The integrity of the applicant training data is ensured.	YES <input type="checkbox"/>

Signature of the training manager or EBT manager _____

(c) In order for the EBT manager to delegate their signature in accordance with point 4(c)(2) of Appendix 10 to another person to endorse the licence of the applicant, the following should apply:

- (1) the person signing the licence should be nominated,
- (2) the person signing the licence should hold or have held an instructor certificate,
- (3) the approved procedure for delegation of signature should include procedures to prevent the person who received the delegation from signing the licence when the EBT programme applicable to the validity period has not been completed.

(d) The authority may customise the form above by requesting additional information or changing the order of the elements of the form.

GM1 to Appendix 10 — Revalidation and renewal of type ratings, and revalidation and renewal of IRs when combined with the revalidation or renewal of type ratings – EBT practical assessment

REVALIDATION OF TYPE RATING — ADMINISTRATIVE PROCEDURES

(a) The operator may nominate several deputy EBT managers to ensure the availability of at least one examiner for each fleet, in the context of workload to manage the EBT programme, several locations of the training facilities, or bases, etc.

(b) For the first revalidation of type rating after the transition from mixed EBT, the examiner may use mixed EBT module(s) in addition to the other EBT module(s) as a means to revalidate the type rating.

(c) In accordance with the approved procedure in Appendix 10, 4. (c)(2), and as provided in AMC1 to Appendix 10 point (c), the EBT manager may nominate the EBT instructor who completed the EBT module as the person to whom the signature of the examiner is delegated. A stamp or electronic signature may exclusively be given from the EBT manager to the EBT instructor, in order to document the delegation in a transparent and secure manner. Following that process, EBT instructors on behalf of the EBT manager can endorse an applicant's licence.

- (d) The EBT programme is included in the operations manual and, in accordance with ORO.FC.145 of Regulation (EU) No 965/2012, for CAT it is subject to prior approval including any changes, its syllabi and the use of individual FSTD.

GM2 to Appendix 10 — Revalidation and renewal of type ratings, and revalidation and renewal of IRs when combined with the revalidation or renewal of type ratings – EBT practical assessment

EBT PRACTICAL ASSESSMENT — PROFICIENCY CHECK

EBT practical assessment (or Practical assessment) is defined in FCL.010. More information can be found in ICAO Doc 9868 ‘PANS-TRG’.

The demonstration of skills to revalidate or renew referred to in the definition of proficiency check in FCL.010 is equivalent to the EBT practical assessments conducted in the EBT programme and the final review of the examiner. In fact, one single EBT practical assessment demonstrates the necessary skills performed in legacy training; however, EBT goes one step further — to revalidate or renew, the pilot performs at least two demonstrations, corresponding to at least two EBT modules within the validity period of the type rating.