



**CIVIL AVIATION DEPARTMENT
MINISTRY OF TOURISM AND CIVIL AVIATION
MALE'
REP OF MALDIVES**

Application for Issue of Student Pilot Permit

Director General of Civil Aviation

I wish to apply for the issue of a Student Pilot Permit. My details are below.

		CAD use only
Operator		
Name of Applicant		
Citizenship		
Permanent Address		
Contact Address		
Contact Phone Number		
Date of Birth		
Enclosed please find		Receipt number
• Evidence of DOB (passport or licence or ID)		Checked by
• Class 1 Medical Certificate		Approved by
		Issued by
		Number
		Date issued

I certify that the information I have given is true and correct

Signed _____

Date _____

