



SECTION:	GENERAL TECHNICAL FORMS	ETO-010
TITLE:	APPLICATION FOR MAINTENANCE TRAINING ORGANIZATION APPROVAL	

1. TYPE OF APPLICATION

- Initial Grant ☐
 variation ☐
 Renewal ☐
 Direct course approval (one off) ☐
 MTOE Off-site training/examination ☐
 Please tick whichever is applicable.

2. ORGANIZATION DETAILS

Training Organization:

- Company Name:
- CAR 147 Approval No UAE.CAR 147.
- Owner's Name:
- Contact No:
- Facsimile:
- E-MAIL:
- Name of Accountable Manager:
- Address:

UAE National Sponsor:

- Name:
- Contact No:
- Facsimile:
- E-MAIL:
- Address:

3. GCAA APPROVALS HELD BY THE ORGANIZATION (Please tick appropriate box if applicable)

Does the organisation hold any GCAA approvals under CAR 21/ CAR M/ CAR 145	CAR 21 Approval <input type="checkbox"/>	UAE.CAR
	CAR M Approval <input type="checkbox"/>	UAE.CAR
	CAR 145 Approval <input type="checkbox"/>	UAE.CAR

4. APPROVALS HELD FROM OTHER ICAO CONTRACTING STATES AUTHORITIES.

Authority	Approval Number	Type of approval	Scope of approval	Date of approval

5. PRINCIPAL LOCATION OF TRAINING:

Address:	
Country	
Contact No:	



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Facsimile:	
E-mail:	
5.1 Additional Facility/Sites requiring approval	
5.1.1 Additional Facility/Site 1	
Address;	
Country;	
Contact No;	
Facsimile;	
E-Mail;	
5.1.2 Additional Facility/Site 2	
Address;	
Country;	
Contact No;	
Facsimile;	
E-Mail;	

6. PERSONNEL TO BE APPROVED/ ACCEPTED BY THE AUTHORITY:	
6.1 Contact Person (responsible for this application)	Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/>
	Name:
	Job Title:
	Phone Number:
	Email:
6.2 Accountable Manager	Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/>
	Name:
	Phone Number:
	Email:
6.3 Quality Manager	Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/>
	Name:
	Phone Number:
	Email:
6.4 Training Manager	Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/>
	Name:
	Phone Number:
	Email:
6.5 Examination Manager	Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/>
	Name:
	Phone Number:



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Email:	
6.6 Other personnel (please specify)	

7. SCOPE AND RATINGS APPLIED FOR

7.1 Type Training Course(s) – List of training courses relevant to this application

Course 01		Course Description:		
Course Type		Cat	Theoretical/Practical	Action Required
Type Training Course <input type="checkbox"/>		B1 <input type="checkbox"/>	Theoretical <input type="checkbox"/>	Course approval <input type="checkbox"/>
Differences Course <input type="checkbox"/>		B2 <input type="checkbox"/>	Practical <input type="checkbox"/>	Course removal <input type="checkbox"/>
Airframe Only <input type="checkbox"/>		B3 <input type="checkbox"/>	Theoretical + Practical <input type="checkbox"/>	One off recognition <input type="checkbox"/>
Avionics Only <input type="checkbox"/>		B1 + B2 <input type="checkbox"/>		
Engine Only <input type="checkbox"/>		C <input type="checkbox"/>		

Course 02	Course Description:		
Course Type	Cat	Theoretical/Practical	Action Required
Type Training Course <input type="checkbox"/>	B1 <input type="checkbox"/>	Theoretical <input type="checkbox"/>	Course approval <input type="checkbox"/>
Differences Course <input type="checkbox"/>	B2 <input type="checkbox"/>	Practical <input type="checkbox"/>	Course removal <input type="checkbox"/>
Airframe Only <input type="checkbox"/>	B3 <input type="checkbox"/>	Theoretical + Practical <input type="checkbox"/>	One off recognition <input type="checkbox"/>
Avionics Only <input type="checkbox"/>	B1 + B2 <input type="checkbox"/>		
Engine Only <input type="checkbox"/>	C <input type="checkbox"/>		

Duplicate table as applicable, for each training course one table has to be completed.

7.2 Basic Training Course(s) – List of training courses relevant to this application

Course 01		
Course Type		Action Required
Basic Course <input type="checkbox"/>	B1.1 (Aeroplanes Turbine) <input type="checkbox"/> A1 <input type="checkbox"/>	Approval of Course <input type="checkbox"/>
	B1.2 (Aeroplanes Piston) <input type="checkbox"/> A2 <input type="checkbox"/>	Removal of Course <input type="checkbox"/>
Bridging Course <input type="checkbox"/>	B1.3 (Helicopters Turbine) <input type="checkbox"/> A3 <input type="checkbox"/>	
	B1.3 (Helicopters Piston) <input type="checkbox"/> A4 <input type="checkbox"/>	
Limitation Removal <input type="checkbox"/>	B2 Avionics <input type="checkbox"/>	
	B3 <input type="checkbox"/>	
	Other: please describe <input type="checkbox"/>	
Course 02		
Course Type		Action Required
Basic Course <input type="checkbox"/>	B1.1 (Aeroplanes Turbine) <input type="checkbox"/> A1 <input type="checkbox"/>	Approval of Course <input type="checkbox"/>
	B1.2 (Aeroplanes Piston) <input type="checkbox"/> A2 <input type="checkbox"/>	Removal of Course <input type="checkbox"/>
Bridging Course <input type="checkbox"/>	B1.3 (Helicopters Turbine) <input type="checkbox"/> A3 <input type="checkbox"/>	
	B1.3 (Helicopters Piston) <input type="checkbox"/> A4 <input type="checkbox"/>	
Limitation Removal <input type="checkbox"/>	B2 Avionics <input type="checkbox"/>	
	B3 <input type="checkbox"/>	



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	Other: please describe <input type="checkbox"/>	

8. APPLICANTS DECLARATION AND ACCEPTANCE OF THE GENERAL CONDITIONS AND TERMS.

I declare that I have the legal capacity to submit this application to the GCAA and that all information provided in this application form is correct and complete.

Name

Signature:

Date/location

9. COMMENTS AND SPONSOR'S SIGNATURE (IF APPLICABLE):

Sponsor's Name:

Signature:

Date:

10. For GCAA Use Only



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Inspector Remarks
<input type="checkbox"/> Recommended <input type="checkbox"/> Not Recommended
Inspector Name: <div style="display: flex; justify-content: space-between;"> Signature: Date: </div>
Licensing Manager: <div style="display: flex; justify-content: space-between;"> Signature: Date: </div>
Manager Remarks
Director of Licensing Approval and Remarks (As applicable) Signature and Date: Remarks:



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11. DOCUMENTATION TO BE SUBMITTED

Please ensure submission of the manuals/documents along with this application, if the application is for an initial grant of an approval no documents detailed in 5 or 6 below are required with this application.

	Documents Check list	Submitted
1	Description of the equipment and facilities to be used	
2	Approval of local Emirate department of Civil aviation (if required)	
3	Emirate economic department approval (if required)	
4	Bank statement or letter of credit (if required)	
5	Copies of curriculum manual/course syllabi or TNAs (Microsoft word format saved on a CD or USB)	
6	One set of examination paper for each module/phase (Microsoft word format saved on a Cd)	
7	Certificate of Incorporation or Trade Licence required for initial applications	
8	Evidence of E-Services subscription.	