

INITIAL ISSUE OF AIRCRAFT MAINTENANCE ENGINEERS LICENCE

1. Name in full

2. Nationality

3. Date of Birth

4. Place of Birth (Dist/State)

5. Educational Qualification

6. Permanent Address

7. Present Address

8. Details of Licence

Roll No.

Examination passed

Session: February

June

October

Category

9. Details of fees

Draft/ Postal Order No.
(As per Aircraft Rule 62)

Dated

Dated

Signature of the Applicant

Enclosures:

- Note:
1. Certified true copies for Sr.No. 3, 5 and 8 should be attached.
 2. Medical Certificate in the prescribed form should be attached.

**OFFICE OF THE DIRECTOR GENERAL OF CIVIL AVIATION
Opp. Safdarjung Airport, New Delhi - 110 003.**

(To be given by Registered Medical Practitioner holding at least MBBS)

MEDICAL CERTIFICATE

Mr/Ms whose signature is given below, has been medically examined by me.

He / She has * the following physical disabilities

* no physical disabilities

Signature of the
Applicant

Signature of
Doctor

Designation

Registration No.

Date

MEDICAL CERTIFICATE FOR COLOUR VISION

I, Dr. hereby certify that I have examined Mr/Ms whose signature is appended below, and certify that his colour vision is Normal/ Defective safe/ Defective unsafe. (Strike off which is not applicable).

The colour vision has been tested with :-

- (1) Pseudo - Isochromatic plates
- (2) Approved Lantern test
- (3) Any other test applicable

(Strike off which is not applicable).

Signature of the Applicant

Signature of Doctor

Designation

Registration No.

Date