



**FIXED WING**  
CONFIDENTIAL PILOT INFORMATION

Last Name: (Print)	First Name:	Employer:
Pilot Licence #:	Engineer Licence #:	Date(s) Licence(s) Issued:

**LICENCE DATA**

TYPE		
Airline Transport:	Commercial:	Other Licences held:
ENDORSEMENTS / TYPE RATINGS		
Floats:	Multi engine:	Night:
Skis:	IFR:	VFR:
Other endorsements:		

**FLYING EXPERIENCE**

AIRCRAFT TYPE BY MAKE/MODEL i.e.: Cessna 210/Beech 99	TOTAL HOURS ON TYPE	PIC HOURS	FLOATS (hours)	SKIS (hours)	PPC EXPIRY DATE	Geographic Area of Operation (Indicate any Arctic Experience)
<b>TOTAL</b>						

**Training Received and Other Experience** (DATE you received training (month/year) and experience (hours))

Mountain Flying	Date	Hrs.	External Load	Date	Hrs.	Wildlife Survey	Date	Hrs.	Aerial Survey	Date	Hrs.
*Low Level Flying											

\* LOW LEVEL FLYING: ENR defines it as flying below 500 ft (AGL) that is not for the purpose of take-off or landing. It would include activities such as Aerial Spraying and Aerial Inspection.

**DECLARATION:** I certify that the information entered on this form is true to the best of my knowledge and belief.

\_\_\_\_\_  
Pilot's Signature

\_\_\_\_\_  
Date

**THIS SECTION TO BE FILLED OUT BY EMPLOYER:**

To the best of my knowledge, I certify that all information entered on this form to be correct. The above-named pilot has been approved by the company's chief pilot to operate the type(s) of aircraft listed and to perform all indicated specialty flying.

\_\_\_\_\_  
Name of Authorized Representative (Please Print)

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
COMPANY NAME