

# Application for Issue or Extension of a BGA Inspector Maintenance Authorisation

V1.2 (see relevant AMP for details)

BGA Inspector Number I/ /					
Title:	First Name:	Second Name and Initials:			
Surname:		Date of Birth (dd/mm/yyyy):			
Home address:					
Postcode:					
Email address:		Telephone:			
		Mobile			
Your home BGA club:					
Is this an initial issue <input type="checkbox"/> or an extension to existing Authorisation <input type="checkbox"/>					
BGA Inspector Ratings – full details in BGA Airworthiness Exposition Tick relevant box(s)					
GL	<input type="checkbox"/>	Glider Inspector (AF)	WR	<input type="checkbox"/>	Wooden Airframe Repair
MR	<input type="checkbox"/>	Metal Airframe Repair	CR	<input type="checkbox"/>	Composite Airframe Repair
SS	<input type="checkbox"/>	Self-Sustainer Sailplane Engine	MG	<input type="checkbox"/>	Powered Sailplane & Motor Glider
TG	<input type="checkbox"/>	Tug Inspector	ST	<input type="checkbox"/>	Senior Tug Inspector
EP	<input type="checkbox"/>	Electric Powerplant	RE	<input type="checkbox"/>	Radio Engineer
CE	<input type="checkbox"/>	Chief Engineer/ARC signatory	JP	<input type="checkbox"/>	Jet Powerplant
CM	<input type="checkbox"/>	Component Maintenance	EO	<input type="checkbox"/>	Engine Inspection and Repair
DU	<input type="checkbox"/>	Duplicate Inspections Only	S	<input type="checkbox"/>	Senior Inspector
Employer and/or profession:					
Training and Qualifications applicable to ratings applied for:					
Please bring applicable certificates to interview. Please see additional information required for new applicants.					

General experience			
From	To	Name of company, club etc and type of work demonstrating a minimum of four years in applicable maintenance or continued airworthiness:	Confirmed by
<p><b>Please attach worksheets detailing work experience for the ratings applied for.</b></p> <p>BGA 220 Personal Experience Record (PER) may be used or other suitable format.</p>			
<b>Additional information required by new applicants (Biographical Data)</b>			
Basic training (Vocational training, Further education etc):			
Type and specialised training (Specific to aircraft maintenance and continued airworthiness):			
Recurrent training (Inspector seminars, continuation training, Human Factors training):			

**Nominations – initial applications.** By signing below, I confirm the following:

I consider the applicant to have sufficient technical knowledge, skills and applicable work experience to be granted a BGA Inspector authorisation. I have reviewed the work experience details submitted to support this application.  
I also consider the applicant to be suitable in all other respects to be a BGA Authorised inspector.

Note - at least one signatory must be a current BGA inspector.

Name \_\_\_\_\_ BGA Authorisation No \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ BGA Authorisation No \_\_\_\_\_ (if applicable)

Signature \_\_\_\_\_ Date \_\_\_\_\_

**All applicants:**

Other supporting information:

Venues for interview – Leicester preferred or elsewhere by arrangement.

Interview Location:

Please note: during the interview you will be required to show a photographic form of identity (driving licence or passport).

Signature of Applicant:

Initials:

Date:

**BGA Use Only**

Interview completed by \_\_\_\_\_ Date \_\_\_\_\_

CTO use only:

Authorisation / ratings approved \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Please send the completed form to:

British Gliding Association, 8 Merus Court, Meridian Business Park, Leicester, LE19 1RJ

Please do not send any fees at this stage.