Appendix 7 to the list of basic requirements to the provision of the state services "Issuance of licences to Aviation personnel" Form

Place for		(type of licence)		
picture		(surname, name patronymic (if any))		
3,5 X	Position hele	Position held:		
-	Subdivision	:		
4,5cm	Date of offi	Date of birth:		
	General edu			
Special education a	nd recent retraining:			
(1)	name of educational in	stitution, courses, month, year	of graduation)	
Holds a medical ce	rtificate of the appropriate of the state of	riate class:	,	
Type(s) of aircraft:				
Grand total hours:_	g hours: of them at night:			
maependent frying	nours	of them at hight		
Independent flying	by aircraft type:			
	ninimiims			
Assigned weather r	n aggidanta			
Assigned weather in Presence of aviation	n accidents:			
Presence of aviation	n accidents:	(nature, type of aircraft, dat	e)	
Presence of aviation	n accidents:		e)	
Presence of aviation	n accidents:	(nature, type of aircraft, dat	e)	
CONCLUSION: by	n accidents:	(nature, type of aircraft, dat	e)	
Examiner:	n accidents: y his/her moral and bu	(nature, type of aircraft, dat	e)	
Examiner:(sur	n accidents:y his/her moral and bu	<i>(nature, type of aircraft, data</i> siness qualities is worthy of	e)	
Examiner:	n accidents: y his/her moral and bu name, name, onymic (if any)	(nature, type of aircraft, data siness qualities is worthy of	e) (date)	
Examiner:	n accidents: y his/her moral and bu name, name, onymic (if any)	<i>(nature, type of aircraft, data</i> siness qualities is worthy of	e)	