U.S. Department of Transportation
Federal Aviation Administration

DESIGNATED PILOT EXAMINER APPLICATION/QUALIFICATION RECORD

Supplemental Information and Instructions

Privacy Act Statement

- The information on the accompanying form is solicited under authority of the Federal Aviation Act.
- Submission of all the data is mandatory except for Social Security Number (SSN) which is voluntary.
- The purpose of this information is to determine your eligibility for designation as a designated pilot examiner.
- The data will be used to evaluate your qualifications and eligibility for designation as a pilot examiner for statistical purposes.
- Your application cannot be processed unless the data is complete.
- Disclosure of your SSN is optional. Disclosure will facilitate maintenance of your records which are maintained in alphabetical order and cross referenced with your SSN and airman number to provide prompt access. In event of nondisclosure, a unique number will be assigned to your file.

Agency Display of Estimated Burden

Public reporting burden of this collection of information is estimated to average 55 minutes per response depending on the complexity. You may send comments concerning the accuracy of this burden statement or any suggestions for reducing the burden to the Office of Management and Budget. You may also send comments to the Federal Aviation Administration,; General Aviation and Commercial Division AFS-800; 800 Independence Avenue S.W.; Washington, DC 20591; Attn: OMB Control No. 2120-0033 .

(DETACH ALL SUPPLEMENTAL INFORMATION AND INSTRUCTION SHEETS BEFORE SUBMITTING FORM)

DESIGNATED EXAMINER CANDIDATE APPLICATION PROCEDURES

HOW TO APPLY

For Initial Designations:

- Complete, sign, and date this form. Answer all applicable questions fully.
- Question 6. Leave blank for initial designation.
- Question 7. See definitions and qualification criteria at the end of these instructions.
- Question 10. Enter only the names of Flight Standards District Offices (FSDO) in whose areas you can provide examiner service on a regular basis.
- Question 13. You do not have to be a United States citizen in order to be a designated examiner if you are designated to serve outside the U.S. or its possessions.
- Use additional sheets of blank paper if you need more space to complete the answer to a question. Be sure to indicate the number of the question you are answering at the top of the sheet.
- Use a separate sheet for each question requiring additional space and attach all additional sheets to this form.
- **Attach a copy of all applicable pilot, flight instructor, and airman medical certificates to this form.**

WHERE TO SEND APPLICATIONS FOR INITIAL DESIGNATION (All Applicants Unless Otherwise Noted.)

Your completed application form with all attached sheets should be forwarded to:

Federal Aviation Administration
Pilot Examiner Standardization, AFS-642
ATTN: National Examiner Board
P.O. Box 25082
Oklahoma City, OK 73125-0082

Keep a copy of this application for your personal records.

WHAT HAPPENS TO YOUR APPLICATION

Your application will be evaluated by the National Examiner Board (NEB) to ensure that you meet the selection criteria for the designation sought. The NEB will advise you by letter whether or not you meet the applicable criteria. If you meet this criteria, the letter from the NEB will state that your application has been accepted and instruct you to complete the examiner predesignation knowledge test (i.e. PEA, PEB, PEG, and/or PER). If you do not meet the selection criteria, the NEB will advise you how the deficiency may be corrected. **Do not take the predesignation knowledge test until receiving a letter of acceptance from the NEB.**

Upon receiving notification that your application has been accepted, take the appropriate predesignation knowledge test at any FAA-approved computerized testing center. Request the pilot examiner test for the category applicable to the designation sought (Airplane, Rotorcraft, Glider, or Balloon). You must forward test results to the NEB within 10 days of the date you complete the test. **Keep a copy of the test report for your personal records.**

Upon receiving the applicant's test report and reviewing the application materials, the NEB will notify the applicant of approval/disapproval for assignment to the national examiner candidate pool. In accordance with candidates' indicated geographic availability, qualifications, and ranking within the pool, the NEB forwards candidate applications to each FSDO requesting a new designee.

Your application will be kept on file in the national examiner candidate pool for a period of 2 years or until you are selected for designation, whichever comes first.

After 2 years, applications of all candidates not selected for designation will be deleted from the pool. An applicant must repeat the application process in order to apply for reassignment to the candidate pool.

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DESIGNATED EXAMINER APPLICATION/QUALIFICATION RECORD Supplemental Information and Instructions (Continued)

NOTE: FAA Form 8710-9 is used for initial designation, renewal, and reinstatement for pilot examiners ONLY. FAA Form 8710-9 does not supersede FAA Form 8710-6, Examiner Designation and Qualification Record. FAA Form 8710-6 can still be used for renewal of PPE's, ACR's, and others, as appropriate.

TRAINING CENTER APPLICANTS

Training center applicants should return the completed form directly to the training center's program manager at the designating FSDO. Training center applicants will be advised of the status of their applications by the designating FSDO.

DESIGNEES WHO DO NOT CONDUCT CERTIFICATION PRACTICAL TESTS

Proficiency Pilot Examiner, Airman Certification Representative, and Military Competency/Foreign Pilot Examiner applicants should return the completed form directly to the designating FSDO.

EXAMINERS APPLYING FOR RENEWAL, ADDITIONAL AUTHORIZATIONS, AND/OR REINSTATEMENT

Examiners applying for renewal, additional authorizations, or reinstatement should return the completed form directly to the designating FSDO. Applications for renewal shall be submitted to the designating FSDO at least 60 days before the examiner's current designation expires.

*** EXCEPTION:** Request for reinstatement must go to the NEB if the applicant has moved to another district.

TYPES OF DESIGNATIONS AND DESIGNEE DEFINITIONS

PE	-	Private Pilot Examiner
CIRE	-	Commercial and Instrument Rating Examiner
CE	-	Commercial Pilot Examiner (For rotorcraft, gliders, and/or lighter-than-air aircraft only)
ATPE	-	Airline Transport Pilot Examiner
FIE	-	Flight Instructor Examiner (Assigned by the FSDO following the 1-year eligibility requirement)
PE/SO	-	Pilot Examiner-Simulator Only
TCE	-	Training Center Evaluator

GENERAL QUALIFICATIONS

- Applicants must hold all pertinent category, class, and type ratings for each aircraft for which designation is sought.
- For designations requiring a medical certificate, the applicant must hold a valid second-class airman medical certificate for initial designation. *(A medical certificate is NOT required for designations limited to examining in free balloons, gliders, or simulators.)*
- An applicant must be at least 21 years old.
- The applicant must have a good record as a pilot and flight instructor with regard to accidents, incidents, and violations,. (Applicants for designation as a PE/SO must have a good record as a pilot and flight instructor or as a ground instructor.)
- The applicant must be employed as a professional flight instructor, serve in another type of piloting service such as executive or air carrier, or serve as an FAR Part 121 or 135 check airman. If the applicant is not employed as a flight instructor, the applicant's employment must include duties primarily devoted to testing airmen or similar evaluation activities.
- An applicant should meet all eligibility and experience requirements for the specific designation sought. *(See the following tables for PE, CE, CIRE, and ATPE requirements or the appropriate FAA order or others.)*
- The applicant must have a reputation for integrity and dependability in the industry and the community.
- The applicant must have a history of cooperation with the FAA.

Instructions for Completing FAA Form 8710-9,

Designated Examiner Application/Qualification Record

1. All entries on FAA Form 8710-9 must be made in permanent ink or typewritten.
2. Read the "PRIVACY ACT STATEMENT" attached to FAA Form 8710-9. Remove the "PRIVACY ACT STATEMENT" portion before submitting FAA Form 8710-9.
3. Complete blocks 1 through 33 as follows:
   a. Block 1. **NAME (Last, First, Middle).**
      (1) Enter your legal name. For record purposes, NO more than one middle name may be entered.
      (2) If you have NO middle name, enter "NMN" (NO middle name) or "NMI" (NO middle initial).
      (3) If you have initial(s) only, enter the initials and then enter "INITIALS ONLY."
      (4) If you are a junior, III, IV, etc., so indicate.
   b. Block 2. **SOCIAL SECURITY NUMBER.**
      (1) Completing block 2 is optional (see "PRIVACY ACT STATEMENT").
      (2) Enter your SSN or either "DO NOT USE" or "NONE."
   c. Block 2a. **DATE OF BIRTH**—Use six-digit, numeric characters, i.e., 08/09/60; not August 9, 1960.
   d. Block 3. **PERMANENT MAILING ADDRESS**—Enter all required information, to include Number and Street, P.O. Box, City, State, and Zip Code.
      NOTE: If a P.O. Box or Rural Route is used, you must furnish (on a separate sheet of paper) the directions required to find your residence. This becomes part of the application and must be signed by you, the applicant. The following shows an example of one applicant's additional statement:
      Example: "I live 2 miles north of state highway 37 on Peachtree Lane in a two-story house with a large barn in the back. (You must sign this statement.)

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e. Block 4. **TELEPHONE NUMBER**—Provide a home telephone number and a business telephone number including area code and extension, if applicable.

f. Block 5. **PURPOSE OF APPLICATION**—Check the appropriate box to indicate: Initial Designation or Reinstatement.

g. Block 6. **PREVIOUS DESIGNATION**—If you ever held a current or previous designation as a pilot examiner in any region mark the "YES" box, and list the dates and location the designation was held. List dates using six-digits, numeric characters. i.e. 08/09/60; not August 9, 1960.

Note: Reinstatements are not to be sent to the NEB unless the applicant has moved to a different district.

h. Block 7. **DESIGNATION SOUGHT**—Designated Pilot Examiner (DPE) applicants will check the box to the left of the designation(s) sought. (i.e. Private Pilot Examiner (PE), Commercial Pilot Examiner (CE), Commercial Instrument Rating Examiner (CIRE), Airline Transport Pilot Examiner (ATPE), Flight Instructor Examiner (FIE), and/or Pilot Examiner /Simulator Only (PE/SO).

i. Block 8. **CATEGORIES/CLASSES/TYPES OF AIRCRAFT**—List the categories, classes, and types of aircraft for which authorization is sought.

j. Block 9. **FAA FLIGHT STANDARDS DISTRICT OFFICE (FSDO) JURISDICTION**—From the list on page iv, enter the FAA FSDO who has jurisdiction in the area or location where you are presently located.

k. Block 10. **OTHER FSDO's**—Any other FSDO's in whose area(s) you could provide examiner services.

l. Block 11. **CERTIFICATES OR RATINGS REVOKED**-Answer "YES" if you have ever had any certificate or rating issued to you revoked. If "YES," describe the circumstances.

m. Block 12. **ACCIDENT/INCIDENT HISTORY**—Answer "YES" if you have had any aviation accidents or incidents within the past 5 years. If "YES," describe the circumstances.

n. Block 13. **U.S.CITIZEN**—You must check "YES" or "NO."

o. Block 14. **COUNTRY IN WHICH YOU HOLD CITIZENSHIP**—Enter name of the country. If dual citizenship is held indicate the names of both countries.

p. Block 15. **ENGLISH LANGUAGE**—If you read and speak the English language fluently, answer "YES."

q. Block 16. **CERTIFICATES HELD**—Enter all certificates held, their certificate number, and ratings and limitations as shown on the certificate(s).

r. Block 17. Have you ever been a **MILITARY PILOT EVALUATOR**?—Check "YES" or "NO." If YES give dates.

s. Block 18. **SPECIAL TRAINING**—List special training you have had pertinent to the designation.

t. Block 19. Have you ever been an **FAA ACCIDENT PREVENTION COUNSELOR OR FAA AVIATION SAFETY COUNSELOR**—Answer "YES" or "NO". If YES give dates and location. List dates using six-digits, numeric characters. i.e. 08/09/60; not August 9, 1960.

u. Block 20. **OTHER AVIATION SAFETY ACTIVITIES**—If you have ever participated in other aviation safety activities, describe the activities, check "YES" or "NO." If YES give dates.

v. Block 21. **FLIGHT EXPERIENCE**—List all your flight time, as requested. (Minimum requirements are listed on pages v and vi.)

w. Block 22. **WORK EXPERIENCE**

(1) Complete the name, address, and telephone number of the employer/organization.

(2) Job Title—Enter job title.

(3) Dates Employed—Enter dates of employment. Use six-digit, numeric characters for dates (i.e., 08/09/60, not August 9, 1960.)

(4) Supervisor's Name—Enter the supervisor's name(s).

(5) Reason for Leaving—Enter reason for leaving this position.

(6) Description of Duties—Give a complete description of the duties performed during this period of employment.

x. Block 23. **AVIATION ACTIVITIES AND PROFESSIONAL RESPONSIBILITIES**—Briefly summarize your aviation activities and professional responsibilities that best qualify you to be a Designated Pilot Examiner.

y. Block 24. **DURING THE PAST 5 YEARS HAVE YOU BEEN FIRED FROM ANY JOB FOR ANY REASON?**—Check "YES" or "NO."

z. Block 25. **HAVE YOU EVER BEEN CONVICTED OF ANY FELONY VIOLATION?**—Check "YES" or "NO."

aa. Block 26. **ARE YOU NOW UNDER CHARGES FOR ANY VIOLATION OF LAW?**—Check "YES" or "NO."

bb. Block 27. **HAVE YOU EVER BEEN IMPRISONED, BEEN ON PROBATION, OR BEEN ON PAROLE?**—Check "YES" or "NO."

cc. Block 28. **HAVE YOU EVER BEEN CONVICTED BY A MILITARY COURT-MARTIAL?**-Check "YES" or "NO."

dd. Block 29. **HAVE YOU EVER BEEN DISCHARGED FROM A MILITARY SERVICE UNDER A GENERAL DISCHARGE?**—Check "YES" or "NO."

ee. Block 30. **HAVE YOU EVER BEEN DISCHARGED FROM A MILITARY SERVICE UNDER OTHER THAN HONORABLE CONDITIONS?**—Check "YES" or "NO."

ff. Block 31. **FULL DETAILS**—Give full details regarding each question in blocks 24 through 30 to which you answered "YES."

gg. Block 32. **EDUCATION AND TRAINING**

(1) Dates: Enter the beginning and ending dates of the training that you attended. Use six-digit, numeric characters (i.e., 08/09/60) not, August 9, 1960).

(2) Name of school—Enter the name of the school(s) which you attended. (Continue on an extra sheet of paper if needed to list all of your training.

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(3) List the curriculum or study program for each training listed.
(4) Enter degrees or certificates received from the schools listed.

hh. Block 33. **APPLICANT'S SIGNATURE**—Sign and date the application after reading the statements in this block. *

* **ALL SIGNATURES SHALL BE ORIGINAL, IN INK, WITH NAME PRINTED IN INK OR TYPEWRITTEN BELOW THE SIGNATURE.**

NOTE: If you need more space for an answer, use a sheet of paper the same size as this page. On each sheet write your name and the item number. Attach all additional forms and sheets to this application.

LIST OF FLIGHT STANDARDS DISTRICT OFFICES

ALASKAN REGION (AAL)

ANC	FSDO-03	ANCHORAGE, AK
FAI	FSDO-01	FAIRBANKS, AK
JNU	FSDO-05	JUNEAU, AK

CENTRAL REGION (ACE)

DSM	FSDO-01	DES MOINES, IA
ICT	FSDO-07	WICHITA, KS
LNK	FSDO-09	LINCOLN, NE
MCI	FSDO-05	KANSAS CITY, MO
STL	FSDO-03	ST. ANN, MO /ST. LOUIS

EASTERN REGION (AEA)

ABE	FSDO-05	ALLENTOWN, PA
FRG	FSDO-11	FARMINGDALE, NY
AGC	FSDO-03	W. MIFFLIN, PA /PITTSBURGH
ALB	FSDO-01	ALBANY, NY
BAL	FSDO-07	BALTIMORE, MD
CRW	FSDO-09	CHARLESTON,WV
DCA	FSDO-27	CHANTILLY,VA /WASH. DC
HAR	FSDO-13	NEWCUMBERLAND, PA /HARRISBURG
PHL	FSDO-17	PHILADELPHIA, PA
NYC	FSDO-15	VALLEY STREAM, NY /JAMAICA
PIT	FSDO-19	CORAOPOLIS, PA /PITTSBURGH
RIC	FSDO-21	SANDSTON, VA /RICHMOND
ROC	FSDO-23	ROCHESTER, NY
TEB	FSDO-25	TETERBORO, NJ

GREAT LAKES REGION (AGL)

CLE	FSDO-25	CLEVELAND, OH
CMH	FSDO-07	COLUMBUS, OH
CVG	FSDO-05	CINCINNATI, OH
DPA	FSDO-03	WEST CHICAGO, IL
DTW	FSDO-23	BELLEVILLE, MI
FAR	FSDO-21	FARGO, ND
GRR	FSDO-09	GRAND RAPIDS, MI
IND	FSDO-11	INDIANAPOLIS, IN
MKE	FSDO-13	MILWAUKEE, WI
MSP	FSDO-15	MINNEAPOLIS, MN
ORD	FSDO-31	SCHILLER PARK, IL
RAP	FSDO-27	RAPID CITY, SD
SBN	FSDO-17	SOUTH BEND, IN
SPI	FSDO-19	SPRINGFIELD, IL

NEW ENGLAND REGION (ANE)

BED	FSDO-01	BEDFORD, MA
BDL	FSDO-03	WINDSOR LOCKS, CT
BOS	FSDO-02	BOSTON, MA
PWM	FSDO-05	PORTLAND, ME

NORTHWEST MOUNTAIN REGION (ANM)

BIL	FSDO-06	BILLINGS, MT
BOI	FSDO-08	BOISE, ID
CPR	FSDO-04	CASPER, WY
DEN	FSDO-03	DENVER, CO
GEG	FSDO-02	SPOKANE, WA
HLN	FSDO-05	HELENA, MT
PDX	FSDO-09	HILLSBORO, /PORTLAND
SEA	FSDO-01	SEATTLE, WA
SLC	FSDO-07	SALT LAKE CITY, UT

SOUTHERN REGION (AS0)

ATL	FSDO-11	COLLEGE PARK, GA /ATLANTA
BHM	FSDO-09	BIRMINGHAM, AL
BNA	FSDO-03	NASHVILLE, TN
CAE	FSDO-13	WEST COLUMBIA, SC
CLT	FSDO-08	CHARLOTTE, NC
FII	FSDO-17	FT. LAUDERDALE, FL
INT	FSDO-05	WINSTON-SALEM, NC
JAN	FSDO-07	JACKSON, MS
JAX	FSDO-16	JACKSONVILLE, FL
LOU	FSDO-01	LOUISVILLE, KY
MEM	FSDO-04	MEMPHIS, TN
MIA	FSDO-19	MIAMI, FL
ORL	FSDO-15	ORLANDO, FL
PIE	FSDO-14	ST. PETERSBURG, FL
RDU	FSDO-06	MORRISVILLE, NC /RALEIGH
SJU	FSDO-21	SAN JUAN, PR

SOUTHWEST REGION (ASW)

ABQ	FSDO-01	ALBUQUERQUE, NM
BTR	FSDO-03	BATON ROUGE, LA
DAL	FSDO-05	DALLAS, TX
DFW	FSDO-07	DALLAS, TX /FT. WORTH
FTW	FSDO-19	FT. WORTH, TX
HOU	FSDO-09	HOUSTON, TX
LBB	FSDO-13	LUBBOCK, TX
LIT	FSDO-11	LITTLE ROCK, AR
OKC	FSDO-15	OKLA. CITY, OK
SAT	FSDO-17	SAN ANTONIO, TX

WESTERN PACIFIC REGION (AWP)

FAT	FSDO-17	FRESNO, CA
HNL	FSDO-13	HONOLULU, HI
LAS	FSDO-19	LAS VEGAS, NV
LAX	FSDO-23	LOS ANGELES, CA
LGB	FSDO-05	LONG BEACH, CA
OAK	FSDO-27	OAKLAND, CA
PHX	CMO -28	PHOENIX, AZ
RAL	FSDO-21	RIVERSIDE, CA
RNO	FSDO-11	RENO, NV
SAC	FSDO-25	SACRAMENTO, CA
SAN	FSDO-09	SAN DIEGO, CA
SDL	FSDO-07	SCOTTSDALE, AZ
SJC	FSDO-15	SAN JOSE, CA
VNY	FSDO-01	VAN NUYS, CA

International Field Office List

FRA-IFO	FRANKFURT
SIN-IFO	SINGAPORE
BRX-IFO	BRUSSELS
LGW-IFO	LONDON

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Designated Examiner Application/Qualification Record
Supplemental Information and Instructions (Continued)

Specific Eligibility Requirements for Private Pilot Examiner (PE) Designees

Eligibility Requirements	Airplane	Rotorcraft	Gliders	LTA Airships	LTA Free Balloon
Certificate(s) Required	Commercial Pilot Flight Instructor	Commercial Pilot Flight Instructor	Commercial Pilot Flight Instructor	Commercial Pilot	Commercial Pilot
Certificate Categories	Both with airplane category	Both with rotorcraft category	Both with glider category	Lighter-Than-Air	Lighter-Than-Air
Rating(s)	Both with appropriate class rating(s) * Instrument-Airplane	Both with appropriate class rating(s)		Airship class rating	Free Balloon class rating
Hours as Pilot In Command (PIC)	2,000 total > 1,000 in airplanes > 300 in past year > 300 in aircraft class sought > 100 night > 5 multiengine in make/model sought	1,000 total > 500 in rotorcraft > 100 in past year > 250 if helicopter > 150 if gyroplane	500 total > 200 in gliders > 10 in past year including > 10 flights	1,000 total > 500 in airships > 200 in past year > 50 night	200 total > 100 in free balloon > 20 in past year, including 10 flights each of 30 minutes duration
Hours as Flight Instructor (Civil or Military)	500 total > 100 in aircraft class of aircraft sought	> 200 in rotorcraft, helicopters, or gyroplanes, as appropriate.	100 total > 50 in gliders	100 in airships	50 in free balloon > 10 in past year

* Required on pilot certificate only.

Specific Eligibility Requirements for Commercial Pilot Examiner (CE) Designees

Eligibility Requirements	Airplane	Rotorcraft	Gliders	LTA Airships	LTA Free Balloon
Certificate(s) Required		Commercial Pilot Flight Instructor	Commercial Pilot Flight Instructor	Commercial Pilot	Commercial Pilot
Certificate Categories		Both with rotorcraft category	Both with glider category	Lighter-Than-Air	Lighter-Than-Air
Rating(s)		Both with appropriate class rating(a)		Airship class rating	Free Balloon class rating
Hours as Pilot In Command (PIC)		2,000 total > 500 in rotorcraft >300 in past year > 100 in past year > 250 if helicopter > 150 if gyroplane, > 100 in large helicopters, 50 in type, if applicable	500 total > 250 in gliders including > 50 flights in past year	2,000 total > 250 in airships > 100 in past year > 50 night	> 200 in free balloon > 1 year experience as commercial balloon pilot
Hours as Flight Instructor			200 total > 100 in gliders	50 in airships	50 in free balloon

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Designated Examiner Application/Qualification Record
Supplemental Information and Instructions (Continued)

Specific Eligibility Requirements for Commercial and Instrument Rating Pilot Examiner (CIRE) Designees

Eligibility Requirements	Airplane - Instrument	Helicopter - Instrument
Certificate(s) Required	Commercial Pilot Flight Instructor	Commercial Pilot
Certificate Categories	Both with airplane category	Both with rotorcraft category
Rating(s)	Both with appropriate class rating(s); Instrument -- Airplane	Both with helicopter class rating; Instrument -- Helicopter
Hours as Pilot In Command (PIC)	2,000 total, including 100 instrument (actual or simualted) > 1,000 in airplanes > 300 in past year > 500 in aircraft class sought > 100 at night > 200 in complex airplanes > If applicable, 300 in turbine airplanes, including 50 in type sought.	2,000 total including 100 instrument (actual or simualted) > 500 in rotorcraft > 100 in past year > 250 in helicopters > If applicable, 100 in large helicopters, civil or military, including 50 in type sought
Hours as Flight Instructor (Civil or Military)	500 in airplanes > 100 in aircraft class sought > 250 instrument flight instruction, including: 200 in airplanes	250 total > 150 given in rotorcraft while preparing pilots for commercial certificates > 100 instrument
Instrument Flight	100 (actual or simulated)	100 (actual or simulated)

Specific Eligibility Requirements for Airline Transport Pilot Examiner (ATPE) Designees

Eligibility Requirements	Airplane	Helicopter
Certificate(s) Required	ATP	ATP
Certificate Categories	Both with airplane category	Both with rotorcraft category
Rating(s)	Both with appropriate class rating(s); Flight Instructor with Instrument -- Airplane	Both with helicopter class rating; Flight Instructor with Instrument -- Helicopter
Hours as Pilot in Command (PIC)	2,000 total in airplanes > 500 in aircraft class sought > 150 instrument time > 50 IMC > If applicable, 300 in turbine and/or large airplanes, including 100 in type pertinent to designation sought.	2,000 total > 1,500 in helicopters > 500 in rotorcraft class sought > If applicable, 300 in large helicopters, including 100 in type pertinent to designation sought.
Hours as Flight Instructor (Civil or Military)	250 total in airplanes while preparing pilots for instrument rating, ATP certificate, or type rating	250 total in helicopters while preparing pilots for instrument rating, ATP certificate, or type rating
Instrument Flight	**(See PIC requirements)**	50 (actual or simulated)

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Form Approved OMB: 2120-0033

U. S. Department of Transportation
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Designated Examiner Application/Qualification Record

1. Name (Last, First, Middle)

2. Social Security Number ___-__-____

2a. Date of Birth / /

3. Address

4. Home Phone ( )

City State ZIP

Work Phone ( )

5. This application is for:
☐ Initial Application
☐ Reinstatement

6. Have you ever held a current or previous designation in any region?
☐ Yes ☐ No
If "Yes," give designation number and dates:
_____ From:_____ To:_____

7. Type of designation(s) sought:
☐ PE ☐ ATPE
☐ CE ☐ FIE
☐ CIRE

8. Categories/classes/types of aircraft for which authorization is sought:

9. FAA FSDO in whose geographical area you maintain a residence or place of business:

10. Other FSDO's in whose area(s) you could provide examiner services:

11. Has any certificate or rating issued to you ever been revoked?
☐ Yes ☐ No (If "Yes," describe the circumstances):

12. Have you had any aircraft accidents or incidents within the past 5 years?
☐ Yes ☐ No (If "Yes," describe the circumstances):

13. Are you a U.S. citizen?
☐ Yes ☐ No

14. If not a U.S. citizen, name the country in which you hold citizenship?

15. Do you read and speak English fluently?
☐ Yes ☐ No

16. Certificates Held:

Type of Certificate	Certificate Number	Ratings and Limitations (as shown on the certificate)

17. Have you ever been a military pilot evaluator?: ☐ Yes ☐ No From: _____ To: _____

18. Special training pertinent to the designation: *(Use additional sheets if necessary.)*

19a. Have you ever served as a chief or asst. chief instructor in an FAR Part 141 school?: ☐ Yes ☐ No From: _____ To_____

19b. Have you ever served as a 121/135 check airman?: ☐ Yes ☐ No From: _____ To_____

19c. Have you ever served as an Aviation Safety Inspector (ASI)?: ☐ Yes ☐ No From: _____ To_____

20. Have you been an FAA Accident Prevention Counselor or FAA Aviation Safety Counselor? ☐ Yes ☐ No
(If "Yes," give dates and location)_____

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Provide copies of All pilot, flight instructor, and medical certificates.

21. Flight Experience (In Hours)

No Approximations (i.e. ±) or Rounding.

Aircraft Class/ Experience	PIC Total	PIC last 12 Mos.	Flight Instr. Given (Civilian/Military)	Flight Instr. Given (last 12 mos.)	PIC Night	Instrument Flight. (Actual / Simulated)	Instrument Flight. Instruction Given
ASEL						/	
AMEL						/	
ASES						/	
AMES						/	
Helicopter						/	
Gyroplane							
Glider						/	
Airship						/	
Free Balloon							

21a. Turbine-powered and/or Large Airplanes/Helicopters

Aircraft Make and Model	PIC Total

Note: Do not fill in shaded areas.

21b. Number of Glider flights as PIC within the past year._____

21c. Number of free balloon flights as PIC that were at least 30 minutes duration within the past year._____

21d. Number of hours as PIC in complex airplanes._____

21e. Number of hours flight instruction given in rotorcraft preparing pilots for commercial pilot certificate (Civilian/Military)._____

21f. Date Commercial balloon certificate acquired._____

21g. Number of hours flight instruction given in airplanes preparing pilots for an ATP certificate, an instrument rating, or a type rating._____

21h. Number of hours flight instruction given in helicopters preparing pilots for an ATP certificate, an instrument rating, or a type rating._____

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Form Approved OMB: 2120-0033

22. Work Experience

Describe all work experience that pertains to your qualifications for the designation sought. Describe your current or most recent work experience in Block A and work backwards, describing each applicable position you have held during **at least** the past 5 years.You may describe work experience accured more than 5 years ago if you wish to do so. Use a separate block for each position described. Include military service if your military experience is pertinent to your application for an examiner designation.

A. **Name of Employer/Organization:**		Telephone Number ( )
Address		
City	State	ZIP
Job Title:	Dates Employed:	Supervisor's Name:
Reason for Leaving:		
Description of Duties:		

B. **Name of Employer/Organization:**		Telephone Number ( )
Address		
City	State	ZIP
Job Title:	Dates Employed:	Supervisor's Name:
Reason for Leaving:		
Description of Duties:		

C. **Name of Employer/Organization:**		Telephone Number ( )
Address		
City	State	ZIP
Job Title:	Dates Employed:	Supervisor's Name:
Reason for Leaving:		
Description of Duties:		

D. **Name of Employer/Organization:**		Telephone Number ( )
Address		
City	State	ZIP
Job Title:	Dates Employed:	Supervisor's Name:
Reason for Leaving:		
Description of Duties:		

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22. Work Experience (Continued)

E. **Name of Employer/Organization:** Telephone Number ( )

Address

City State ZIP

Job Title: | Dates Employed: | Supervisor's Name:

Reason for Leaving:

Description of Duties:

F. **Name of Employer/Organization:** Telephone Number ( )

Address

City State ZIP

Job Title: | Dates Employed: | Supervisor's Name:

Reason for Leaving:

Description of Duties:

Use Additional Sheets as Necessary

23. Briefly summarize your aviation activities and professional responsibilities that best qualify you to be a designated pilot examiner:

24. During the last 5 years, were you fired from any job for any reason? ☐ Yes ☐ No

25. Have you ever been convicted of any felony violation? ☐ Yes ☐ No

26. Are you now under charges for any violation of law? ☐ Yes ☐ No

27. Have you ever been imprisoned, been on probation, or been on parole? ☐ Yes ☐ No

28. Have you ever been convicted by a military court-martial? ☐ Yes ☐ No

29. Have you ever been discharged from a military service under a General Discharge? ☐ Yes ☐ No

30. Have you ever been discharged from a military service under other than Honorable conditions? ☐ Yes ☐ No

31. Give full details regarding each question in blocks 24 through 30 to which you have answered "Yes."

32. Education and Training—*(High School or GED give date completed: _____)*

Dates		Name of School	Curriculum or Study Program	Degree or Certificate Received
From: Mo-Day-Yr	To: Mo-Day-Yr			

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SIGNATURE RELEASE OF INFORMATION AND CERTIFICATION — Read Carefully
YOU MUST SIGN THIS APPLICATION — (Print or type name under signature block)

- I understand that a false statement on any part of this application will be grounds for not approving this application, for rescinding my eligibility as an examiner candidate, for not designating me, or terminating any designation I may receive.
- I understand that any information given may be investigated.
- I consent to the release of information regarding my personal and technical qualifications for designation as a pilot examiner by employers, schools, law enforcement agencies, and other individuals and organizations, to investigators, employees of the federal government, and persons not employed by the federal government to whom the FAA has delegated the authority to screen and approve or disapprove pilot examiner applicants.
- I understand that, if my application is accepted, approval for assignment to the national examiner candidate pool is dependent on my passing the predesignation knowledge test with a score of 80 percent or higher.
- I understand that assignment to the national examiner candidate pool does not guarantee selection or designation as a pilot examiner and that, if selected, designation is dependent on satisfactory completion of a practical test (demonstration of competency) and satisfactory completion of the Initial Pilot Examiner Standardization Seminar.
- I understand that my FAA accident/incident/violation history will be verified at each stage of the application process.
- I understand that designation as a pilot examiner is a privilege, not a right, and that any designation received may be terminated, revoked, or not renewed at any time for any reason the FAA Administrator deems appropriate.
- I certify that, to the best of my knowledge and belief, all of my statements on this application are true, correct, complete, and made in good faith.

33. Signature of Applicant *(Sign application in dark ink)*	Date signed *(Month, Day, Year)*
(Print or type name under signature)	

FOR NATIONAL EXAMINER BOARD USE ONLY

(For Original issuance Only)

☐ Accepted for Predesignation Testing ☐ Not Qualified Date: _____

Predesignation Test Score: _____ Date of Test: _____

☐ Approved for Pool ☐ Disapproved Date: _____

Signature of Selection Official: _____ Title: _____

Referred to: _____ FSDO. Date: _____

☐ Selected ☐ Declined Date: _____

Remove from Candidate Pool if not selected by: Date: _____

For FAA Use Only ***(For Renewals, additional Designations, and/or Reinstatements)***

Action: ☐Renewal ☐Reinstatement ☐Additional Authorization Date of Last Report:

Test Activity: ***(Renewals/Additional Designations Only)***

Type of Certification/Rating	Total Submitted	Disapproved by Examiner	Number Returned for	Type of Certification/Rating	Total Submitted	Disapproved by Examiner	Number Returned for Correction
Recreational Pilot				ATP			
Recreational Pilot, Addt'l Rating				ATP, Additional Rating			
Private Pilot				CFI , Original Issue			
Private Pilot, Addt'l Rating				CFI, Additional Rating			
Commercial Pilot				CFI, Renewal			
Commercial Pilot, Addt'l Rating				CFI, Reinstatement			
Instrument Rating							

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Designated Examiner Application/Qualification Record (Continued)

The examiner continues to meet the criteria for the original designation .... ☐ Yes ☐ No
The examiner meets the criteria for the additional authorization sought ..... ☐ Yes ☐ No
There is need for the examiner's services ..... ☐ Yes ☐ No
☐ Not Applicable

Inspector's Recommendation: ☐ Approve ☐ Disapprove

Reason for Disapproval (Attach additional sheets, if required.)

For FAA Use Only: ***(Complete for all original designations, renewals, additional authorizations and/or reinstatements)***

The individual submitting this application has satisfactorily demonstrated competency to perform the duties of the following designation(s):

☐ PE ☐ CE ☐ CIRE ☐ ATPE
☐ PE/SO ☐ MC/FPE ☐ TCE

Aircraft Categories:

☐ Airplane ☐ Rotorcraft ☐ Glider ☐ Lighter Than Air

Additional Qualifications/Limitations *(if any):*

Inspector's Signature _____ Date: _____ FSDO: _____

Regional Office:
☐ Concur ☐ Disapprove Date: _____

Signature _____ Routing Symbol: _____

FSDO:
Certificate of Authority Issued Date: _____ FSDO: _____

Examiner Number: _____ Expiration Date: _____

LOA(s) Issued:

_____ _____ _____ _____ _____ _____

Additional FSDO's (if any) To Be Served by the Examiner:

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