SOUTH AFRICAN CIVIL AVIATION AUTHORITY

Section/division: **Personnel Licensing, Aviation Safety Operations**
Telephone number: **011-545-1000** *Fax Number:* **011-545-1459**
Physical address: **Ikhaya Lokundiza, 16 Treur Close, Waterfall Park, Bekker Street, Midrand, Gauteng**
Postal address: **Private Bag X73, Halfway House 1685** *Website:* **www.caa.co.za**

Form Number: CA 61-18

DETAILS OF BANK ACCOUNT FOR PAYMENT OF PRESCRIBED FEE			
Bank: **Standard Bank of SA Ltd**	*Branch:* **Brooklyn, Pretoria**	*Branch Code:* **011245**	*Account Number:* **013007971**

COMPULSORY CLIENT PAYMENT CODE (to be completed on deposit slip)		
Service/transaction	***Over the counter payments***	***EFT, Internet, Wire, Electronic payments***
Application for a student pilot licence		

APPLICATION FOR STUDENT PILOT LICENCE

Details of Applicant						
Surname		First names				
Licence number		Date of birth		Age		
ID/Passport number		Permanent resident in SA*		YES		NO	
Nationality						

Population group* (for statistics purpose)					**Gender***	
African	White	Coloured	Asian	Other	Male	Female

Residential address					
	Province		Postal code		
Postal address					
	Province		Postal code		
Telephone number		Cellular phone number			
Fax number		Email			

Details of aircraft to be used and of ATO			
Aircraft make(s) & model(s)			
ATO Name		ATO Number	
ATO Telephone number		ATO email	

NAME OF GRADE I OR II FLIGHT INSTRUCTOR (BLOCK LETTERS)		
LICENSE NUMBER		
SIGNATURE		**DATE**

SIGNATURE OF STUDENT	**NAME IN BLOCK LETTERS**	**DATE**