

CHECKLIST FOR APPROVAL OF AOC ATO'S MOP'S (PART 141)

NAME OF APPLICANT			
DATE OF FORMAL APPLICATION ACCEPTED			
KIND(S) OF OPERATION			
Manual/Document	Date received	Date returned	Date accepted or approved
<i>Manuals to be APPROVED indicated as "Approve", other manuals may be ACCEPTED.</i>			
Training Manual of Procedures			Approve

Manual/Document (continued)	Date received	Date returned	Date accepted or approved
<i>Manuals to be APPROVED indicated as "Approve", other manuals may be ACCEPTED.</i>			
Pilot Training Program			Approve
• Basic Indoctration			Approve
• Emergency Training			Approve
• Ground Training			Approve
• Flight Training			Approve
• Recurrent Training			Approve
• Transition/Upgrade Training			Approve
• Differences Training			Approve
• Security Training			Approve
• Hazardous Materials Training			Approve
• Check Airmen/Instructor Training			Approve
Flight Attendant Training Program			Approve
• Basic Indoctration			Approve
• Emergency			Approve
• Recurrent Training			Approve
• Differences Training			Approve
• Security Training			Approve
• Hazardous Materials Training			Approve
• Competency Check/Instructor Training			Approve
Dispatch Training Program			Approve
• Basic Indoctration			Approve
• Ground Training			Approve
• Recurrent Training			Approve
• Differences Training			Approve
• Security Training			Approve
• Hazardous Materials Training			Approve

• Competency Check/Instructor Training			Approve
• Crew Resource Manual			
Licence Endorsement Training Programs or Syllabi			
• RVSM Manual			
• CFIT Manual			
• TACS/ACAS Manual			
• ETOPS Manual			
• GNSS Manual			
• CRM Manual			
• RNAV Manual			

APPROVAL OF AOC AVIATION TRAINING ORGANISATION MANUAL OF PROCEDURES			
MOP APPROVED		MOP NOT APPROVED	
SIGNATURE OF INSPECTOR	NAME IN BLOCK LETTERS	DATE	
SIGNATURE OF MANAGER	NAME IN BLOCK LETTERS	DATE	
COMMENTS:			

FOR OFFICIAL USE ONLY			
FLIGHT OPERATIONS ADMINISTRATION			
RECEIPT OF ACKNOWLEDGEMENT OF APPROVED AOC AVIATION TRAINING ORGANISATION MANUAL OF PROCEDURES			
SIGNATURE OF FOD ADMIN ASSISTANT	NAME IN BLOCK LETTERS	DATE	
CLIENT COPY DISPATCHED (METHOD OF DELIVERY)		IF MOP IS MAILED, TRACKING NO.	
SIGNATURE OF RECIPIENT	NAME IN BLOCK LETTERS	DATE	
CONFIRMATION OF CAA COPY FILED			
SIGNATURE OF PERSON FILING CAA COPY OF MOP	NAME IN BLOCK LETTERS	DATE	