DÚ/F093-B/v8/OPL_en



DOPRAVNÝ ÚRAD TRANSPORT AUTHORITY

EXAMINER NOTIFICATION PRIOR TO THE TEST	
1 EXAMINER'S DATA	
Name and surname:	
Certificate number:	
Email:	
Mobile phone:	
2 APPLICANT'S DATA	
Name and surname:	
License number:	
Email:	
Mobile phone:	
3 TEST DATA	
Test on a simulator / aircraft	FSTD Aircraft
Assumed simulator / aircraft type:	
Category of Aircraft:	
FSTD certificate number:	
Type of test:	
Purpose of test: (*DP indicates Designation procedure is required)	
Test location:	
Planned date of test:	
Time of test (local time):	
ATO name and certificate no. (if applicable):	
4 INFORMATION	
Notification of intended test shall be sent to <u>testnot@nsat.sk</u> at least 5 days prior to the planned day of conduction. Late notification shall be refused.	
DESIGNATION APPLICATION FOR SKILL TEST OR ASSESSMENT OF COMPETENCE	
Proceed in accordance with the current version of the Examiner Differences Document . Then wait for the particular email designation. No fee required. <u>Required attachments: Scanned copy of the Examiner's Certificate; FSTD approval certificate (if applicable)</u>	
5 EXAMINER'S STATEMENT	
Hereby I declare I have reviewed the Examiner Briefing Procedure and Requirements of the Transport Authority. I agree with processing of my personal data by the Transport Authority.	
Examiner's name: Date:	Signature:
6 TO BE FILLED BY TRANSPORT AUTHORITY	
 □ Examiner has been authorized to conduct an ATPL Skill Test in accordance with the data in this form. □ Applicant's flight time has been verified by a competent Transport Authority inspector (FCL.510.A). Enclose a copy of this form to the documentation after the test. 	
Date:	Signature: