

Enrollment Application (the form contains interactive fields for electronic submission)

SECTION I: PERSONAL AND CONTACT INFORMATION

First Name: _____ Middle Name: _____

Last Name: _____ Suffix: _____

NOTE: You must enter your name above EXACTLY as it appears on official government issued ID such as passport, birth certificate, etc.

Address: _____

City: _____ State: _____ Postal Code: _____

Country: _____ Email Address: _____

Home Phone: _____ Cell Phone: _____

Driver's License Number: _____ Driver's License State/County: _____

Emergency Contact Name: _____ Relationship: _____

Emergency Contact Phone Number: _____

Gender: M/ F. Date of Birth (mm/dd/yyyy): ___/___/___ Birth City: _____ Country: _____

Local Address in the US (Where are you staying?): _____

City: _____ State: _____ Postal Code: _____ Room / Unit #: _____

SECTION II: SECURITY AND PRIVACY

Country of citizenship: _____

Passport #: _____ Issue Date: ___/___/___ Exp. Date: ___/___/___

******IMPORTANT******

- **US citizens** will be required to show proof of citizenship upon arrival;
- **NON US citizens** are required to obtain the proper TSA security clearance(s) with a "Permission to Initiate Training" status prior to starting a flight training course;
- **Non US citizens** must obtain a TSA category I or II security clearance prior to starting flight training for ATP-CTP and type rating, or category III for ATP Multi Engine (non-type).

SECTION III: AERONAUTICAL EXPERIENCE DATA

Do you now hold a US Pilot Certificate? YES NO

FAA (US) Pilot Certificate Number: _____ Ratings: _____

FAA (US) Medical Certificate Number: _____ Class: _____ Date Issued: ___/___/___

NON-US (ICAO) Pilot Certificate and Ratings: _____

Total Flight Hours: _____ Date of Last Flight: ___/___/___ Date of Last Flight Review: ___/___/___

Type rating 1: ___(PIC/ SIC); Type rating 2: ___(PIC/ SIC); Type rating 3: ___(PIC/ SIC)

Hours Flown as Pilot In Command, total: _____

ATP.Academy

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Class	Total	Solo	Pilot in Command (PIC)	Cross Country Solo/PIC	Instrument Actual & Simulated	PIC under Supervision (PICUS)	Night PIC
Airplane Single Engine							
Airplane Multi Engine							

Please Note: Applicants for ATP courses should read **FAR part 61.153 and Part 61.159** for the required aeronautical experience for the rating desired BEFORE submitting this application.

SECTION IV: ENGLISH PROFICIENCY STATEMENT

I _____ understand that the Federal Aviation Administration (FAA) requires that all pilot applicants be able to read, write, speak and understand the English language and that my English skills must meet or exceed the FAA and ICAO minimum requirements. I also understand that if English is my second language, my flight training course may take longer than the advertised length of time for training.

Signature: _____ Date: ____ / ____ / ____

SECTION V: How did you hear about ATP.Academy?

Google Ads
 Google Search
 Friends / Students
 Educational Agents
 Conference / Event (_____)

SECTION VI: REQUESTED COURSES

Which courses you interested in?

ATP-CTP
 ATP Non-type
 ATP with Type Rating: A320/ A330/ B737/ B747/ B757/ Other (_____)
 Only Type Rating (A320): Initial/ Reduced (Upgrade)/ Recurrent

SECTION VII: SUPPORTING DOCUMENTS

For your ATP-CTP certification process we ask you to submit the copies of your **passport** and **pilot license** together with this filled in Enrollment Application to info@flydreams.us.