

Form. No. Part-FCL 320A

Revision 1

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Revision Date: 11/09/2023

**APPLICATION FOR THE ISSUE OF A  
PART-FCL COMMERCIAL PILOT LICENCE  
& SKILL TEST (AEROPLANE)**

**(Modular course ONLY)**

European Commission Regulation (EU) No. 1178/2011 as amended, requires that an individual has all of their licenses administered by the National Aviation Authority that holds their medical records (Part MED.A.030 and FCL.015).  
***If your medical records are not held by the HCAA, your application will be rejected.***

**Please complete the form in BLOCK CAPITALS having read the guidance notes attached to this form.**

**1. PERSONAL DETAILS**

Surname ..... First Name(s) .....

Title (Mr / Mrs / Ms etc) ..... Date of Birth (dd/mm/yyyy) .....

Nationality ..... Place of Birth (Town) ..... (Country) .....

Permanent address .....

..... Postcode .....

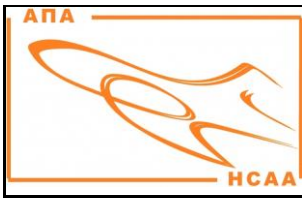
Contact Tel. No. .... Mobile Tel. No. ....

E-mail address ..... Fax Number .....

**2. DETAILS OF ALL FLIGHT CREW LICENCE(S) HELD OR PREVIOUSLY HELD**

State of Issue	Type of License (e.g. PPL, CPL etc)	Category of License (e.g. Aeroplane, Helicopter etc)	License No.	Expiry Date

HCAA Use Only:				
Application Review:	Issue <input type="checkbox"/>	Pending Items <input type="checkbox"/>	Do not Issue <input type="checkbox"/>	
Pending Items				
Applicant Informed via	DMS <input type="checkbox"/>	TEL <input type="checkbox"/>	EMAIL <input type="checkbox"/>	Date: <input type="text"/> Tick IF UPDATED <input checked="" type="checkbox"/>
License & Type Rating Issued:			Expiry Date:	<input type="text"/>
Restrictions				
HCAA Authorized Personnel (Name):				
Signature:			Date:	<input type="text"/>



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**3. APPLICATION (tick as appropriate)**

I am applying for the issue of a Part-FCL CPL(A), including the Class and/or Type rating indicated below;

Single-engine Piston (Land)  Multi-engine Piston (Land)  Other  (please specify):.....

Type of course completed:

CPL(A) Modular  CPL(A) Modular including MEP  reduced CPL(A) Modular

If a reduced CPL(A) Modular course has been completed, indicate below the basis for the reduction:-

ICAO CPL / ATPL(A)  Valid IR(A)  Valid IR(H)  Course completion certificate for Basic Instrument Flight Module

**4. CLASS 1 MEDICAL CERTIFICATE**

State of Issue	Date of Medical	Expiry Date of Class 1 privileges	AME Name, Medical Centre & Location	AME No.	Details of any Limitations / Endorsements	HCAA use only

**5. FLIGHT EXPERIENCE**

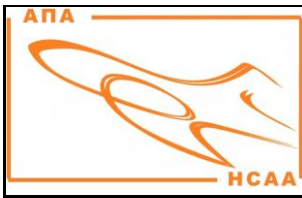
	Part-FCL minima (Hours)	Hours completed	HCAA use only
1. Total flight time as pilot of aeroplanes	<b>200<sup>1</sup></b>		
2. Flight time as pilot-in-command of aeroplanes	<b>100</b>		
3.(a) VFR cross-country flight time as pilot of aeroplanes	<b>20</b>		
(b) Date of most recent Pilot-in-Command cross-country flight of not less than 540km (300nm) during which full stop landings at two aerodromes different from the aerodrome of departure have been made	<b>N/A</b>	Date...../...../.....	
4. Instrument instruction time on aeroplanes	<b>10<sup>2</sup></b>		
5.(a) Total flight time at night as pilot of aeroplanes	<b>5</b>		
(b) Dual instruction at night on aeroplanes	<b>3</b>		
(c) Dual cross-country navigation at night on aeroplanes	<b>1</b>		

<sup>1</sup> Other flight time will be credited as follows;

- as pilot-in-command of helicopters if the holder of a PPL(H) (max. credit 30 hrs)
- as pilot-in-command of helicopters if the holder of a CPL(H) (max. credit 100 hrs)
- as pilot in command of touring motor gliders or gliders (max. credit 30 hrs)
- as pilot-in-command of airships if the holder of a PPL(As) (max. credit 30 hrs)
- as pilot-in-command of airships if the holder of a CPL(As) (max. credit 60 hrs)

<sup>2</sup> Instrument ground time in a FNPT I, FNPT II or FFS (max. credit 5 hrs)

Credit claimed (Hours)	HCAA use only



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**(Modular course ONLY)**

**6. THEORETICAL KNOWLEDGE**

Level of examinations passed (e.g. CPL(A) or ATPL(A))	Member State under whose authority exams were passed	Date of final examination pass	Expiry date of examination pass	HCAA use only

**7. ENGLISH LANGUAGE PROFICIENCY**

Date of ELP Assessment	Level achieved	Name of Examiner	Examiner Number	HCAA use only

**8. COURSE COMPLETION CERTIFICATE (to be completed by the Head of Training)**

I certify that (name) .....has met the pre-requisite requirements in accordance with Appendix 3 to Part-FCL, and has satisfactorily completed a modular course of training for the grant of a Commercial Pilot License (Aeroplane). I further certify that I have examined the applicants flying logbook(s) and that the entries contained therein meet, in full, the flying experience requirements for the grant of a Part-FCL Commercial Pilot's License (Aeroplane).

PBN theoretical knowledge course in accordance with FCL.615 of Annex I (Part-FCL)  YES]  NO]

PBN flight training in accordance with FCL.615 of Annex I (Part-FCL)  YES]  NO]

Date course started: ..... Date course completed: .....

<b>Training Course Summary</b> (Complete as applicable)	Hours Completed
Dual visual flight instruction	
Dual Instrument flight instruction	
Instrument Ground time (BITD /FNPT I /FNPT II /FTD 2 /FFS) ( <b>FSTD Identification No(s)</b> ..... )	
Dual flight instruction in a SEP 'complex aeroplane'	
Dual flight instruction in a MEP aeroplane	
<b>COURSE TOTAL</b>	

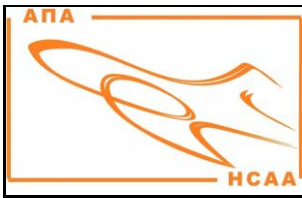
**Note:** If additional night flight instruction was given due to the applicant not holding a Night Rating at commencement of the course, please also complete HCAA form PEL-FCL 611 (Application for a Night Rating (Aeroplane))

Approved Training Organization (ATO) ..... ATO Approval No. ....

Competent Authority issuing Approval .....

Name of Head of Training .....

Signature of Head of Training: ..... Date: .....



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**(Modular course ONLY)**

**9. CPL(A) SKILL TEST**

**(to be completed by the Examiner)**

I certify that I have examined the applicants flying logbook(s) and the entries contained therein meet, in full, the flying experience requirements for the grant of a Part-FCL Commercial Pilot License (Aeroplane).

I have reviewed and applied the national procedures and requirements of the applicant's competent authority contained in the latest version of the Examiner Differences Document (*only applicable where the competent authority responsible for the applicant's license is not the same that issued the examiner's certificate*); **Examiners Differences Document Version** \_\_\_\_\_

I further certify that (Name) ..... has passed the CPL(A) skill test, as follows

**Pass date:** ...../...../..... **Aircraft type:** ..... **Aircraft registration:** .....

Examiner's Name: ..... Examiner Number: .....

Issuing Competent Authority: ..... Date of 'Non-HCAA Examiner's Briefing' (if applicable): ...../...../.....

Examiners signature: ..... Date: ...../...../.....

**Note:** Examiners are reminded that they must complete the Skill Test Report Form and submit to the HCAA's Personnel Licensing Office within **14** days of the date of skill test, and if applicable, a copy of the confirmation email(s) from the HCAA in respect of the 'Non-HCAA Examiner's Briefing' and 'Notification of Test'.

**10. SUMMARY PRIVACY NOTICE**

How will we use your information?

The information you provide to us via this form will be used to enable us to carry out our regulatory duties including processing your request to issue a flight crew license (FCL), the administration and maintenance of said license and of subsequent licenses/certificates and for enforcement purposes. We will not disclose any of your information to any organization without your explicit consent, except where we are obliged to do so under relevant EU and Hellenic legislation, or to comply with law enforcement agencies.

**11. APPLICANT'S DECLARATION**

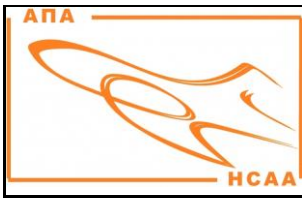
I hereby declare that:

- 1) I do not hold a Part-FCL license issued by another EASA Member State;
- 2) I have not applied for a Part-FCL flight crew license in another Member State;
- 3) I have never held a flight crew license, issued another Member State, which was revoked or suspended.

I further declare that the information given in this form is true and correct to the best of my knowledge and belief.

Applicant's Signature ..... Date .....

**Note:** It is an offence for a person to make, procure to be made, or assist in making any false representations for the purpose of procuring for any reason the issue, validation, extension or re-issue of a license or the issue, renewal or revalidation of a rating, authorization or certificate, whether for that person or any other person.



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## PART 2 – EXAMINER REPORT FOR CPL (A) SKILL TEST

Name of applicant: ..... Date of Birth: (dd/mm/yyyy) .....

Attempt No.: ..... Date of Test: ..... Place of Test: .....

Applicant's signature: .....

I certify that I have examined the training records (as applicable) and pilot logbook(s) of (name) ..... and that the entries contained therein meet, in full, the qualification, training and experience requirements for the initial issue of a Part-FCL Commercial Pilot License (Aeroplane). I have made the applicant aware of the consequences of providing incomplete, inaccurate or false information related to their training and flight experience.

Examiner's Name: ..... Examiner Number: .....

Issuing Competent Authority: ..... Date of Skill Test Notification to the HCAA: ...../...../.....  
(of Examiner Certificate)

Examiners signature: .....

**Note:** Examiners are reminded that they must complete Part 2 (Examiner report for CPL (A) skill test) and submit the original to the HCAA's Personnel Licensing Office as soon as practicable but at within 14 days of the date of skill test together with a copy of the 'Notification of Test' confirmation email (including signed declaration).

### DETAILS OF FLIGHT(S)

**Attempt No.** .....

Date	Aircraft Type	Registration	Block Times		Duration
			Departure	Arrival	

Result: Pass  Partial Pass  Fail

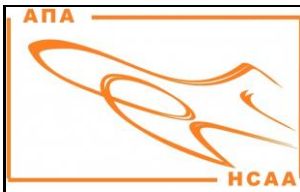
**Partial pass / Fail only:** If applicable, specify any further training requirement (hours) prior to re-test:  
A/C ..... Sim/FNPT II ..... Ground .....

**Partial Pass Re-test**

Date	Aircraft Type	Registration	Block Times		Duration
			Departure	Arrival	

Result: Pass  Fail

**Fail only**  
If applicable, specify any further training requirement (hours) prior to the next attempt:  
A/C ..... Sim/FNPT II ..... Ground .....



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**(Modular course ONLY)**

Name of applicant ..... Date of Birth (dd/mm/yyyy) .....

**SECTION 1 PRE-FLIGHT OPERATIONS AND DEPARTURE**

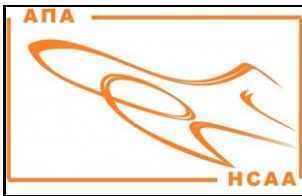
	Use of the aeroplane checklists, airmanship, control of the aeroplane by external visual reference, anti-icing/de-icing procedures and principles of threat and error management apply in all sections.	1 <sup>st</sup> Attempt		2 <sup>nd</sup> Attempt		Comments
		Pass (✓)	Fail (✓)	Pass (✓)	Fail (✓)	
a	Pre-flight, including: Flight planning, Documentation, Mass and balance determination, Weather brief, NOTAMS					
b	Aeroplane inspection and servicing					
c	Taxiing and take-off					
d	Performance considerations and trim					
e	Aerodrome and traffic pattern operations					
f	Departure procedure, altimeter setting, collision avoidance (lookout)					
g	ATC liaison – compliance, R/T procedures					
<b>Result of Section</b> (circle as applicable)		Pass	Fail	Pass	Fail	

**SECTION 2 GENERAL AIRWORK**

		1 <sup>st</sup> Attempt		2 <sup>nd</sup> Attempt		Comments
		Pass (✓)	Fail (✓)	Pass (✓)	Fail (✓)	
a	Control of the aeroplane by external visual reference, including straight and level, climb, descent, lookout					
b	Flight at critically low airspeeds including recognition of and recovery from incipient and full stalls					
c	Turns, including turns in landing configuration. Steep turns 45°					
d	Flight at critically high airspeeds, including recognition of and recovery from spiral dives					
e	Flight by reference solely to instruments, including:					
	(i) level flight, cruise configuration, control of heading, altitude and airspeed					
	(ii) climbing and descending turns with 10°–30° bank					
	(iii) recoveries from unusual attitudes					
	(iv) limited panel instruments					
f	ATC liaison – compliance, R/T procedures					
<b>Result of Section</b> (circle as applicable)		Pass	Fail	Pass	Fail	

**SECTION 3 EN-ROUTE PROCEDURES**

		1 <sup>st</sup> Attempt		2 <sup>nd</sup> Attempt		Comments
		Pass (✓)	Fail (✓)	Pass (✓)	Fail (✓)	
a	Control of aeroplane by external visual reference, including cruise configuration Range/Endurance considerations					
b	Orientation, map reading					
c	Altitude, speed, heading control, lookout					
d	Altimeter setting. ATC liaison – compliance, R/T procedures					
e	Monitoring of flight progress, flight log, fuel usage, assessment of track error and re-establishment of correct tracking					



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**(Modular course ONLY)**

f	Observation of weather conditions, assessment of trends, diversion planning				
g	Tracking, positioning (NDB or VOR), identification of facilities (instrument flight). Implementation of diversion plan to alternate aerodrome (visual flight)				
<b>Result of Section (circle as applicable)</b>		<b>Pass</b>	<b>Fail</b>	<b>Pass</b>	<b>Fail</b>

**SECTION 4 APPROACH AND LANDING PROCEDURES**

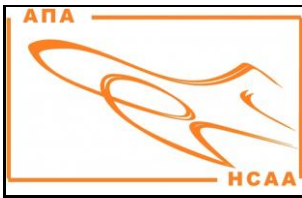
		1 <sup>st</sup> Attempt		2 <sup>nd</sup> Attempt		Comments
		Pass (✓)	Fail (✓)	Pass (✓)	Fail (✓)	
a	Arrival procedures, altimeter setting, checks, lookout					
b	ATC liaison - compliance, R/T procedures					
c	Go-around action from low height					
d	Normal landing, crosswind landing (if suitable conditions)					
e	Short field landing					
f	Approach and landing with idle power (single-engine only)					
g	Landing without use of flaps					
h	Post flight actions					
<b>Result of Section (circle as applicable)</b>		<b>Pass</b>	<b>Fail</b>	<b>Pass</b>	<b>Fail</b>	

**SECTION 5 ABNORMAL AND EMERGENCY PROCEDURES**

	<i>This section may be combined with sections 1 through 4</i>	1 <sup>st</sup> Attempt		2 <sup>nd</sup> Attempt		Comments
		Pass (✓)	Fail (✓)	Pass (✓)	Fail (✓)	
a	Simulated engine failure after take-off (at a safe altitude), fire drill					
b	Equipment malfunctions including alternative landing gear extension, electrical and brake failure					
c	Forced landing (simulated)					
d	ATC liaison - compliance, R/T procedures					
e	Oral questions					
<b>Result of Section (circle as applicable)</b>		<b>Pass</b>	<b>Fail</b>	<b>Pass</b>	<b>Fail</b>	

**SECTION 6 SIMULATED ASYMMETRIC FLIGHT AND RELEVANT CLASS OR TYPE ITEMS**

	<i>This section may be combined with sections 1 through 5</i>	1 <sup>st</sup> Attempt		2 <sup>nd</sup> Attempt		Comments
		Pass (✓)	Fail (✓)	Pass (✓)	Fail (✓)	
a	Simulated engine failure during take-off (at a safe altitude unless carried out in an FFS)					
b	Asymmetric approach and go-around					
c	Asymmetric approach and full stop landing					
d	Engine shutdown and restart					



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e	ATC liaison – compliance, R/T procedures, Airmanship					
f	As determined by the FE — any relevant items of the class or type rating skill test to include, if applicable: (i) aeroplane systems including handling of autopilot					
	(ii) operation of pressurization system					
	(iii) use of de-icing and anti-icing system					
g	Oral questions					
	<b>Result of Section (circle as applicable)</b>	<b>Pass</b>	<b>Fail</b>	<b>Pass</b>	<b>Fail</b>	

1. Use of the aeroplane checklists, airmanship, control of the aeroplane by external visual reference, anti-icing/de-icing procedures and principles of threat and error management apply in all sections.

**Note.**

The aeroplane used for the skill test shall meet the requirements for training aeroplanes and shall be certificated for the carriage of at least four persons, have a variable pitch propeller and retractable landing gear.

2. The route to be flown shall be chosen by the FE and the destination shall be a controlled aerodrome. The applicant shall be responsible for the flight planning and shall ensure that all equipment and documentation for the execution of the flight are on board. The duration of the flight shall be at least 90 minutes.
3. The applicant shall demonstrate the ability to:
  - a) operate the aeroplane within its limitations,
  - b) complete all manoeuvres with smoothness and accuracy,
  - c) exercise good judgement and airmanship;
  - d) apply aeronautical knowledge; and
  - e) maintain control of the aeroplane at all times in such a manner that the successful outcome of a procedure or manoeuvre is never seriously in doubt.

**FLIGHT TEST TOLERANCES**

4. The following limits shall apply, corrected to make allowance for turbulent conditions and the handling qualities and performance of the aeroplane used.

— Height

- normal flight  $\pm 100$  feet
- with simulated engine failure  $\pm 150$  feet
- Tracking on radio aids  $\pm 5^\circ$

— Heading

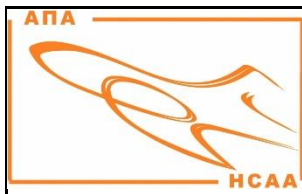
- normal flight  $\pm 10^\circ$
- with simulated engine failure  $\pm 15^\circ$

— Speed

- take-off and approach  $\pm 5$  knots
- all other flight regimes  $\pm 10$  knots

Items in section 2 (c) and (e)(iv), and the whole of sections 5 and 6 may be performed in an FNPT II or an FFS.





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(modular course only)**

## GUIDANCE NOTES & SUBMISSION INSTRUCTIONS

### Guidance Notes

In order for the HCAA to process your application as quickly as possible, it is important that you complete the application form correctly. Please complete the form in conjunction with the following guidance notes.

#### Section 1 – Personal Details

Please ensure that your First Name(s) are entered **exactly** as per the 'evidence of identity' document that you submit with your application - see Submission instructions at the end of this form.

#### Section 2 – Details of Existing Flight Crew License(s) held

Please enter details of all flight crew license(s) (including foreign licenses) held.

#### Section 3 - Application

Please indicate the Class or Type rating for which you are applying, the type of CPL(A) modular course completed, and the basis for any reduction given in the training course.

#### Section 4 – Class 1 Medical Certificate

Please enter details of your valid Part-MED Class 1 Medical Certificate.

#### Section 5 – Flight Experience

Please enter details of your flying experience in the relevant sections of the table. **Note:-** Credit for PIC flight time in an aircraft category other than Aeroplanes can only be claimed if you hold a pilot license, or equivalent privileges, for the appropriate category of aircraft.

#### Section 6 – Theoretical Knowledge

Please enter details of the theoretical knowledge examinations passed. If the examinations have not been passed with the HCAA, the results will be verified with the State under whose authority exams were passed as part of the license issue process.

#### Section 7 – English Language Proficiency (ELP)

Please enter details of your ELP assessment.

#### Section 8 – Course Completion Certificate

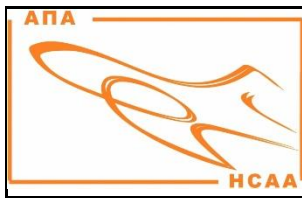
This section must be completed by the ATO's Head of Training or nominated Deputy. If a Night Rating was not held by the applicant at commencement of the CPL Modular course and the required additional night flying instruction was given, the Head of Training must also complete the course completion certificate on HCAA form PEL-FCL 611 (Application for a Night Rating).

#### Section 9 – CPL(A) Skill Test

This section must be completed by the Examiner who conducted the CPL(A) skill test.

#### Section 11 – Applicant's Declaration

This section must be completed by the applicant after reviewing all information entered on the application form. If you are unable to agree with any of the statements in the declaration, please contact the Personnel Licensing Office for further advice before submitting this application.



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(modular course only)**

**SUBMISSION INSTRUCTIONS(SEE NOTES)**

Please, send your application along with the following attachments to [info@hcaa.gov.gr](mailto:info@hcaa.gov.gr) with the following

Subject: **PEL-FCL - (License Number if available & Last Name)**

- All original Flying logbooks
- Copy of your valid Part-MED Class 1 Medical Certificate
- Copy of your Passport or National Identity card as evidence of identity
- Copy of your Part-FCL or theoretical knowledge examination results
- English Language Proficiency Assessment form PEL-FCL 270 or local equivalent if completed with a non-HCAA ELP Assessor
- e-Administrative Fee Code – eparavolo (1 per Flight Exam) 8808 & (Initial CPL) 8782

**If Applicable**

- Completed application form PEL-FCL 611 **(if a Night Rating was not held prior to commencing the CPL(A) Modular Course).**
- Copy of ICAO CPL(A) / ATPL(A) and validating medical certificate or valid IR(A) or valid IR(H) or course completion certificate for BIFM, as applicable **(reduced CPL(A) modular course applicants ONLY)**
- Copy of relevant flight crew license(s) / qualification(s) and validating medical certificate(s) **(if claiming credit in Section 5 for flight experience in an aircraft category other than aeroplanes).**
- English Language Proficiency Assessment form PEL-FCL 270 or local equivalent if completed with a non-HCAA ELP assessor **(Note: the acceptance of a non-HCAA ELP assessor or English Language Assessment Body must be confirmed by the HCAA in advance)**
- Copy of ATO Approval Certificate **(if CPL(A) Modular course is completed with a non-HCAA approved ATO).**
- Copy of the Flight Examiner's flight crew license and examiner certificate **(if skill test was completed with a non-HCAA certified Examiner)**
- Copy of the FSTD Qualification Certificate **(if an FSTD is used on the training course)**

**Please note that failure to submit all required documentation may result in the return of your application.**