

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

1. PERSONAL DETAILS

Surname(s)	. First Name(s)
Title (Mr / Mrs / Ms etc)	Date of Birth (dd/mm/yyyy)
Nationality	Place of Birth
Permanent address	
	Postcode
Contact Tel. No.	Mobile Tel. No
E-mail address	

2. DETAILS OF PREVIOUS ATTESTATIONS HELD

	State of Issue	Airline	Attestation Unique Reference No. / code	Date of Issue
/ /				
				MYTT
	VIEL			

3. COURSE COMPLETION CONFIRMATION (for first time application for a CCA)

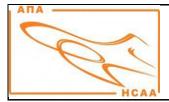
Where a separate Course Completion Certificate issued in accordance with Part-CC (CC.TRA.220) is not supplied with this application, this confirmation must be signed by the Head of Training (or nominated Deputy) of the Airline or Cabin Crew Training Organization (CCTO) that conducted the initial course of training (CC.TRA.220).

I certify that	has satisfactorily completed a course of training in accordance with							
CC.TRA.220 for the issue of a CCA and has passed the required examination covering all parts of the course.								
Course Data(a)	Examination Date:							
Signature	Date							
Name (BLOCK CAPITALS)	Position							
Name of Training Organization (TO)	TO No							

4. HCAA 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 for the issuance of a Cabin Crew Attestation (CCA), the administration and maintenance of subsequent issues 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.



5. APPLICATION & DECLARATION

I hereby apply for the issue of a Cabin Crew Attestation (CCA) based on

Initial Issue

Replacement of lost/stolen CCA.

I hereby declare that:-

- I do not hold CCA(s) issued by any EASA Member State in accordance with Part CC (see guidance note 4) unless I am transferring those CCA(s) as part of this application;
- 2) I have not applied for a CCA in another Member State;
- 3) I have never held a CCA, issued by another Member State, which was revoked or suspended.
- I understand that the information provided may require verification from the issuing bodies.

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 licence or the issue, renewal or revalidation of a rating, authorization or certificate, whether for that person or any other person.

GUIDANCE NOTES, PAYMENT FORM & 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

The Full Name (Surname and First Name) shall be as stated as in the official identity document of the applicant.

Date and place of birth as well as nationality shall be as stated as in the official identity document of the applicant.

Section 2 - Details of Attestation(s) held

Please enter details of the Attestation(s) held.

Evidence that you have exercised the privileges of your attestation with an operator registered in an EASA Member State during the previous 60 months must also be provided.

Note that it is no longer possible to issue a CCA on the basis of an EU-Ops attestation

Section 3 – Course Completion Confirmation

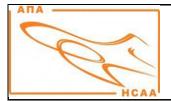
This Section must be completed by the Head of Training (or nominated Deputy) of the Operator or CCTO that conducted the course of training (for first time applications only) where an original Course Completion Certificate issued in accordance with Part-CC (CC.TRA.220) is not supplied with this application.

Section 4 – Application & Declaration

This section must be completed by the applicant after reviewing all information entered on the application form.

General

Please allow 30 working days processing time before making any enquiries relating to this application.



SUBMISSION INSTRUCTIONS

Please note that failure to complete this form fully and submit all required documentation may result in the return of your application

Please, send your application along with the following attachments to info@hcaa.gov.gr with the following

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

Please enclose the following:

Original Attestation and any other attestations that you hold or have held.

(Note if the original attestation is required for operational reasons during the application process, a copy will suffice. The new attestation cannot be issued to the applicant until the original is presented to the HCAA.)

Evidence that you have exercised the privileges of your attestation with an operator registered in an EASA Member State during the previous 60 months. (from the expected date of issue of new attestation)

(Evidence may be in the form of FTL records, original signed statement of confirmation of operational use from operator etc.)

Copy of your official identity document (Passport, National Identity Card etc) (State of Issue / Passport Number / Photograph page(s) only)

e-Administrative Fee Code – eparavolo 4531

If applicable;

Copy of course approval certificate (including any Appendices) (Only if course was completed by an Airline Operator or CCTO approved by an EASA Member State other than Greece)

HCAA Use Only:							
Application Review:							
HCAA Authorized Personnel (Name):							
Signature:			Date:				