



**Civil Aviation Authority of Nepal
Flight Safety Standards Department
Licensing and Examination Division**

FORM FOR RENEWAL OF EXPIRED LICENCE (12 to 24 Months)

Name :	Date of Birth:
Sex :	Age :
Nationality :	Marital Status :
Licence Number :	Holds :-
Class & Category Rating :	
Medical Assessment (Class I):	Type Rating :
Approved Ground Refresher Class :	INSTRUCTOR :
Flight Training :	
Flight Test Completed on :	INSTRUCTORS :
	CAAN Observer /DCP:
Aviation Language Proficiency Level & Validity	Logbook certified copy/ CA-39:
Copy of Licence:	CAAN Fee :

Prepared By:
(Operator's Representative)

Checked By:
(Licensing Officer)

Verified By:
(Chief, LED)

Approved By :
(Director, FSSD)