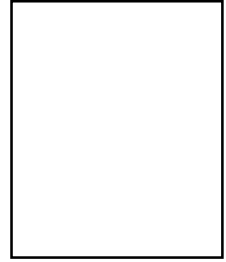


# PUNJAB STATE CIVIL AVIATION COUNCIL

Civil Aerodrome, Sangrur Road, Patiala – 147001 (Punjab)

(Tele: - 0175 - 2970697, Email: – admnpscac@gmail.com)

(Application form for the post of Assistant Pilot Instructor)



1. Name of the post applied for \_\_\_\_\_
2. Name of the applicant (in block letter) \_\_\_\_\_
3. Male/Female \_\_\_\_\_ 4. Married/Unmarried \_\_\_\_\_
5. Father's Name \_\_\_\_\_
6. Mother's Name \_\_\_\_\_
7. Correspondence address \_\_\_\_\_  
\_\_\_\_\_
8. Permanent address \_\_\_\_\_  
\_\_\_\_\_
9. a) Telephone Number \_\_\_\_\_ b) Mobile Number \_\_\_\_\_  
c) Email (Bold letters) \_\_\_\_\_
10. Date of Birth \_\_\_\_\_, Age as on date of advertisement \_\_\_\_\_
11. Nationality \_\_\_\_\_
12. a) If employed, present designation and pay scale \_\_\_\_\_  
b) Name of present employer \_\_\_\_\_  
c) Have you obtained permission of your present employer? \_\_\_\_\_  
d) Present or last drawn gross salary drawn \_\_\_\_\_  
e) If selected, joining time needed \_\_\_\_\_

13. **Educational Qualifications (starting from Matric):**

Examination	Main Subject Taught	Name of Board/University	Year of passing	Total marks Obtained	Total marks	% of marks

14. **TOTAL FLYING/AVIATION TRAINING EXPERIENCE/QUALIFICATION**

**Details of License:**

License	Number	Validity	Remarks

**Flying Experience:**

A/ C Type	PIC	Day	PIC	Night	Instructional	Total

**Aviation Training Qualifications:**

Organization	Date From	Date To	Level/Qualification	Remarks

**ADMINISTRATIVE EXPERIENCE**

- 15. Any other details which strengthen your claim appointment. (Attached separate sheet, if necessary)
- 16. **Referees** (They should be professionally competent persons, well acquainted with the applicant's training accomplishments, capability and character, but must not be relations)

Name /Status/Address

- (i) \_\_\_\_\_
- (ii) \_\_\_\_\_
- (iii) \_\_\_\_\_

- 17. **List of certificates and testimonials** (attested copies be attached).

- |             |              |
|-------------|--------------|
| (i) _____   | (v) _____    |
| (ii) _____  | (vi) _____   |
| (iii) _____ | (vii) _____  |
| (iv) _____  | (viii) _____ |

- 18. **Application Fee (As demand draft)**

Demand Draft No. & date \_\_\_\_\_ Bank Name \_\_\_\_\_ Amount \_\_\_\_\_

- a) I solemnly declare that the foregoing information is correct and complete to the best of my knowledge and belief and I shall be personally responsible for any consequences whatsoever. Which may arise at any subsequent stage, if any of the above information is found to be incorrect.
- b) I have never been convicted/debarred/disqualified or dismissed.

Date \_\_\_\_\_

\_\_\_\_\_

Signature of the candidate

Place \_\_\_\_\_

**DECLARATION BY THE CANDIDATE**

Post applied for \_\_\_\_\_ at Punjab State Civil Aviation Council.

I hereby declare that the above information is true, complete and correct to the best of my knowledge and belief. I have not suppressed any material, fact or factual information. I understand that my candidature is liable to be rejected in the event of any misstatement/discrepancy in the particulars being detected and after my appointment in such an event, my services are liable to be terminated without any notice to me or reason thereof. I am not aware of any circumstances which might impair my fitness for employment under the Government.

Date:

Place:

Signature of the candidate

**Name of Organization: -** \_\_\_\_\_

**{Candidate already employed should get the following endorsement signed by his/her present employer (appointing authority)}**

1. Certified that Dr./Shri/Smt./Kumari \_\_\_\_\_ holds a post of \_\_\_\_\_ in this department/office/institution/organization. I have no objection to his/her application being considered for the post.
  
2. Certified that he/she submitted his/her application to the department/office/institution/organization on \_\_\_\_\_ for onward transmission to the Punjab State Civil Aviation Council, Patiala.

Date:

Signature  
Designation  
Name of Organization

**Annexure – I**

**SELF EVALUATION**

Date:

Signature of Applicant



**Punjab State Civil Aviation Council, Patiala**

**IMPORTANT INSTRUCTIONS**

1. Candidates must have qualification as given in the detailed advertisement.
2. The form should be filled in, neatly and legibly in candidate's own handwriting. The envelope must have clearly written on top "**Application for the Post of \_\_\_\_\_**." Applications should preferably may be sent by **speed post/registered post/hand** as Courier service providers do not deliver postage at PSCAC, Civil Aerodrome, Sangrur Road, Patiala. PSCAC will not take any responsibility for any postal delay, whatsoever. The application must reach to this office within 10 days from the date of advertisement.
3. For the post of Assistant Pilot Instructor, applicant should attach reports on incident/accident, if any, during the career.
4. The candidates must bring their original documents for verification at the time of skill test/written test/assessments of merits.
5. It is not obligatory to call every candidate who possesses the essential qualifications for skill test/written test and assessment of merits. Only shortlisted candidates will be called for skill test/written test and assessment of merits. Flying test will be conducted by Chief Flying Instructor for the post of API. Decision of selection committee would be final and binding to the participated candidates.
6. Application must be supported with a Demand Draft of ₹ 500/- as application fee in favour of "**Punjab State Civil Aviation Council**" payable at **Patiala**. Fee once paid will be not be refunded in any case.
7. PSCAC reserves right to postpone/cancel skill test/written test/assessment of merits on short notice and information for same will be communicated on email/mobile phone provided by the applicant.
8. If the information supplied by the candidate is missing in certain vital respects, such as date of birth, examination record etc. as required in Column No. 10, 13 & 14 of the application form, it would not be possible for the Punjab State Civil Aviation Council to call such a candidate for interview and the candidate shall have no claim whatsoever for being considered for the post applied for.
9. The candidate should indicate names and complete addresses of the referees as provided in column No. 16 of the application form.
10. Self-attested copies of certificates/documents should be attached with the application form. Incomplete application not accompanied by the attested copies, fee or received after last dates shall not be entertained.
11. All claims must be supported by relevant certificate documents.
12. No TA/DA will be paid to the candidate for attending the skill test/written test/assessment of merits.
13. Clarification may be sought through email [admnpsscac@gmail.com](mailto:admnpsscac@gmail.com), or by telephone No. 0175 -2970697.