



# Air Training Corps RNZAF Flying Immersion & National Aviation Course (Power) Application Form

Name: \_\_\_\_\_ Squadron: \_\_\_\_\_

## *Notes for completion:*

1. This form is to be used for all Flying Immersion applications. This includes applications to attend the ATC National Aviation Course (Power) at Woodbourne and to attend the RNZAF Flying Immersion at Ohakea. This form is also to be used to apply to attend the National Aviation Course (Power) as a returning student.
2. Attention to detail, correct and legible completion is required.
3. An NZCF 8 is to be completed and forwarded with this application.
4. **RNZAF Flying Immersion Applicants:** Also attach other suitable documentary evidence to support this application. Previous attendees of the National Aviation Course (Power) should also attach a copy of their course report. All such reports must include a clearance from the Chief Flying Instructor (CFI) to apply for the RNZAF Flying Immersion.
5. **National Aviation Course (Power) Returning Student Applicants:** Preference and priority for the National Aviation Course (Power) student positions will be given to those applying for the National Aviation Course (Power) for the first time. If any spaces remain these may be allocated to returning students who, if selected, can also attend the course.
6. Nominations are to be received by the Area CFTSU by the close off date detailed in the NZCF Annual Training Plan. Late nominations will not be accepted.

# NZ CADET FORCES – AIR TRAINING CORPS RNZAF FLYING IMMERSION & NATIONAL AVIATION COURSE (POWER) APPLICATION

## PART ONE: APPLICATION

### PERSONAL INFORMATION:

1. Surname: \_\_\_\_\_ Initials: \_\_\_\_\_ Rank: \_\_\_\_\_  
Sqn: \_\_\_\_\_ DOB: \_\_\_\_\_

### APPLICATION:

1. I wish to apply for: (Select one)      RNZAF Flying Immersion  
    National Aviation Course (Power)  
    National Aviation Course (Power) *as a Returning Student*
2. Were you recommended to attend an RNZAF Flying Immersion?      YES      NO  
 (By CFI at a previous National Aviation Course (Power) – If yes go straight to Part Two.)
3. Have you previously attended a National Aviation Course (Power)?      YES      NO  
 If yes, when? \_\_\_\_\_
4. Have you previously applied, but were unsuccessful?      YES      NO
5. Have you attended the National Aviation Course (Navigation)?      YES      NO  
 (For information only)

### EDUCATIONAL QUALIFICATIONS:

6. List School and/or other relevant qualifications: (from year 11 onwards).

Year	Subject	Grade	Year	Subject	Grade

### NZCF COURSES AND UNIT CAMPS ATTENDED:

7. List NZCF Courses and Unit Camps Attended: (Include Staff & Student Positions).

Year	Course or Camp Name	Qualification	Year	Course or Camp Name	Qualification

## REASON FOR APPLICATION

8. Why do you consider that you should be selected for the RNZAF Flying Immersion or the National Aviation Course (Power)?  
(If applying for the RNZAF Flying Immersion, also state why you want to join the RNZAF as a pilot)

(Continue on separate sheet, and attach, if necessary)

## PART TWO: PARENT/GUARDIAN/CAREGIVER CONSENT

9. Parent/Guardian/Caregiver:

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

(Please Print)

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(If different to that on the NZCF 8)

10. I certify that should my son/daughter/ward be selected for the RNZAF Flying Immersion or the National Aviation Course (Power), he/she has my consent to engage in flying training in civilian or military training aircraft.

11. I acknowledge that I am responsible for arranging any desired personal insurance cover and for the costs associated with flights and obtaining a Civil Aviation Class 2 Medical Certificate for him/her (in the case of the National Aviation Course (Power)).

## **PART THREE: CADET UNIT COMMANDER RECOMMENDATION AND DECLARATION**

12. Cadet \_\_\_\_\_ has been in the ATC for \_\_\_\_\_  
(Name)

years \_\_\_\_\_ months

13. My recommendation is:

### **DECLARATION:**

14. I certify that should the above named cadet be selected for the National Aviation Course (Power), this ATC Squadron accepts the responsibility of ensuring that the course fees are forwarded to the National Secretary ATCANZ, on receipt of an invoice, before the commencement of the course.

15. I declare that to the best of my knowledge the information in this application, and that the information supplied on the Aviation Questionnaire at Part Five of this application is correct.

Name: \_\_\_\_\_  
(Please Print)

Rank: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Cadet Unit Commander: No \_\_\_\_\_ Squadron, ATC

## **PART FOUR: CADET FORCES TRAINING AND SUPPORT UNIT RECOMMENDATION**

16. Area Co-ordinators Recommendation:

Name: \_\_\_\_\_

Rank: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## PART FIVE: STUDENT QUESTIONNAIRE

17. Surname: \_\_\_\_\_ Initials: \_\_\_\_\_

Rank: \_\_\_\_\_ Squadron: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: (     ) \_\_\_\_\_

Cell Phone: (     ) \_\_\_\_\_

### 18. FORMAL FLYING TRAINING EXPERIENCE:

Power Aircraft: Hrs. \_\_\_\_\_

Gliders: Hrs. \_\_\_\_\_

Aircraft Types Flown:

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### 19. For National Aviation Course (Power) only:

Do you have a preference for the type of aircraft you wish to fly during this course?

- Piper Tomahawk / Cessna 152 / State other: \_\_\_\_\_ / No Preference<sup>1</sup>:  
*(Delete as applicable)*

Do you have a Class Two Medical Certificate? <sup>2</sup>                      YES      NO<sup>3</sup>

If yes, state the Certificate No: \_\_\_\_\_

- Notes:**
1. You should consider what aircraft you are most likely to continue flying after the course.
  2. If you are successful, you are required to report to the course with this certificate. However, do not delay submitting this return of this application if you do not have one.
  3. You should only proceed to obtain a Class Two Medical Certificate if you are advised that your application has been successful.

20. Applicant's Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

**An NZCF 8 must also be attached to this application.**