

Application for the approval as Language Assessment Body (LAB)

Application for the approval as Language Assessment Body (LAB)
according to Civil Aircrew Notice FCL 7

Please fill in the framed fields of the form, sign it and send it together with attachments to:

AUSTRO CONTROL GmbH, Aviation Agency, Schnirchgasse 17, 1030 Vienna, Austria

1 Type of application

Application for the approval as Language Assessment Body (LAB) according to Civil Aircrew Notice FCL 7.

2 Applicant

Name

Street

Place

Postal

Country

Telephone

E-Mail

3 Head of LAB

Title

First Name

Last Name

Telephone

E-Mail

4 Quality and Compliance Manager (QCM)

Title

First Name

Last Name

Telephone

E-Mail

5 Aviation Language Proficiency Test

Name of Aviation Language Proficiency Test

6 Language Proficiency Linguistic Expert 1 (LPLE1)

Title

First Name

Last Name

Telephone

E-Mail

7 Language Proficiency Linguistic Expert 2 (LPLE2)

Title

First Name

Last Name

Telephone

E-Mail

8 Language Proficiency Linguistic Expert 3 (LPLE3)

Title

First Name

Last Name

Telephone

E-Mail

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9 Language Proficiency Examiners (LPEs)

List of LPEs active within the LAB

	Name	LPE Number
1	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/>
7	<input type="text"/>	<input type="text"/>
8	<input type="text"/>	<input type="text"/>
9	<input type="text"/>	<input type="text"/>
10	<input type="text"/>	<input type="text"/>
11	<input type="text"/>	<input type="text"/>
12	<input type="text"/>	<input type="text"/>
13	<input type="text"/>	<input type="text"/>
14	<input type="text"/>	<input type="text"/>
15	<input type="text"/>	<input type="text"/>
16	<input type="text"/>	<input type="text"/>
17	<input type="text"/>	<input type="text"/>
18	<input type="text"/>	<input type="text"/>
19	<input type="text"/>	<input type="text"/>
20	<input type="text"/>	<input type="text"/>

10 Attachments (Please attach, if not specified differently, copies of the listed documents to the application)

- CV of Head of LAB, QCM, LPLE1, LPLE2, LPLE3
- Certificates of Head of LAB, QCM, LPLE1, LPLE2, LPLE3
- Philosophy for the establishment of an LAB

11 Signature of Applicant

Place	Date	Name in capital letters	Signature
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>