



THE HONOURABLE COMPANY OF AIR PILOTS

incorporating Air Navigators

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REGISTRATION FOR PILOT APTITUDE ASSESSMENT

Date of Birth: Day _____ Month _____ Year _____

Title: _____ Surname: _____ Forenames: _____

Sex: Male _____ Female _____ Nationality _____

Passport Number: _____ NI No: _____

Address: _____

_____ Post Code _____

Email: _____

Telephone: Landline: _____ Mobile: _____

Educational Data

GCSE: _____

A LEVELS: _____

DEGREE/FURTHER EDUCATION: _____

Licences/Ratings Held: _____

No. Flying Hours (including Aircraft Type): _____

Current Employment: _____

Details of any previous Pilot Aptitude Testing: _____

I heard about Pilot Aptitude Testing through: _____

I wish to attend the Aptitude Testing Session at RAF Cranwell on: _____
and I am aware that when I take part in this session, I will be unable to re-take these specific tests at RAF Cranwell
(with either the Air Pilots or any other organisation) for at least 12 months.

I enclose a cheque for £155.00 made payable to **AIR PILOTS**

Signed _____ Dated _____