REGISTRATION FOR PILOT APTITUDE ASSESSMENT

Date of Birth: Day ________ Month __________ Year ________ Age on Assessment Date:__________
(Please note must be 18 or over on the assessment date)

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 £165.00 made payable to AIR PILOTS

Signed ____________________________  Dated ____________________________