



CASA Stamp:

Flying School Stamp and/or Contact Details:
(not mandatory)

IMPORTANT INFORMATION FOR APPLICANTS

- 1:** An aeronautical radio operator certificate (AROC) is NOT a replacement for a flight radio operator licence (FROL). The requirements for a FROL, previously issued under CAR 5, are embedded in the training for the licence. **Therefore this application form is not required as part of a licence application.**
- 2:** Individuals who currently hold an Aircraft Radio Operator Certificate of Proficiency (AROCOP) and do NOT hold a CASR Part 61 licence, can use this form to apply for a CASR Part 64 Aeronautical Radio Operator Certificate (AROC). There will be no charge for the issue of this certificate.
- 3:** If you hold an AROCOP and also hold a CASR Part 61 flight crew licence, the transitional regulations do not provide for the transition of the AROCOP to an AROC. The privileges of the AROCOP are embedded within the CASR Part 61 licence.
- 4:** Individuals who are applying for an initial issue of an AROC must complete appropriate sections and the payment page.
- 5:** To be issued with an AROC, the applicant must have been assessed for an Aviation English Language Proficiency (AELP) (minimum ICAO Level 4) or General English Language Proficiency (GELP) (see Form 61-9ELP), or meets the general English Language Proficiency confirmed by an authorised person (see Form 61-9GELP).
- 6:** For further details regarding AELP and GELP Assessments, see the relevant CASA Information Sheet on the [CASA website](#).
- 7:** Payment for this application can be made [online](#). Go to the CASA webpage and click the Payment button. You must attach a copy of the receipt with this application.
- 8:** This form can be completed electronically and saved locally to your computer. Once the ARN has been entered into the first page, it will automatically update in the applicant ARN fields on subsequent pages. CASA recommends that applicants complete as much of the form electronically as possible.
- 9:** Please ensure your application and the checklist are completed correctly and that all required supporting documentation is provided. Incomplete applications will not be accepted and may be returned to you for amendment. **Fields and sections marked with an * are mandatory.**

Applicant Details as per Birth Certificate / Passport:

Title:* _____

Family Name:* _____

Given Names:* _____

Date of Birth:* _____

Applicant ARN:*

--	--	--	--	--	--	--	--

CONTACT DETAILS

Note: You are required to notify CASA of any changes to your personal contact information (refer to CASR 11.070). Correspondence, including permissions issued as a result of this application, will be sent by post to the current postal address according to CASA's records.

You should notify CASA of any changes using one of the following methods:

- Log onto the CASA Self Service Portal <https://portal.casa.gov.au/selfservice/>
- Submit Online Change of Details form <https://portal.casa.gov.au/casaforms/addrchange.htm>

Privacy Statement: Any personal information you provide to CASA is protected by the *Privacy Act 1988* (Cth). CASA can only collect, use and disclose that information in accordance with that Act. CASA will use the information collected in this form for purposes associated with performing its functions under the *Civil Aviation Act 1988*, the *Airspace Act 2007*, the *Aviation Transport Security Act 2004* or the regulations made under those Acts. For full details on how CASA collects, protects and uses personal information, please refer to [CASA's Privacy Policy](#).

Type of Application *

- Aeronautical Radio Operator Certificate (AROC) – Initial Issue. Complete sections A, B, D, E and Payment Authorisation
- Transition of an Aircraft Radio Operator Certificate of Proficiency (CAR 83A and CASR 202.304) to a CASR Part 64 Aeronautical Radio Operator Certificate (AROC). Complete sections D and E.
- Conversion of a Radio Operator Licence or Certificate issued by the competent authority in any country or by the ADF. Complete sections C, D and E.

--	--	--	--	--	--	--	--

Section A: Qualification Details Initial Issue only

1. Test Results Issued by: RTO Flight Instructor Person approved under CASR 64.012

2. Test Results* (to be completed by Flight Instructor, RTO or Approved Person)

Assessment	Examined by	Signature	ARN	Date
Practical				___ / ___ / ___
Theory				___ / ___ / ___

3. Details of Registered Training Organisation (to be completed by RTO)

Legal Name:		Code:	
ABN:		RTO Type:	
Qualification Code:			

Section B. English Language Proficiency Requirements * Refer to CASR 64.015; CASR Part 61 Manual of Standards, Schedule 2 and Schedule 8

Aviation or General English Language Proficiency Assessment

I have completed an AELP or GELP assessment:

- Assessment report was previously submitted to CASA (Flight Crew Licensing) **OR**
- Form 61-9ELP attached

General English Language Proficiency (alternative)

I have completed an English language proficiency:

- Notification was previously submitted to CASA (Flight Crew Licensing) **OR**
- Form 61-9GELP attached

Section C: Overseas or ADF Conversion - Attach a Certified Copy

Type of Radio Controller	Licence or Certificate Number

Section D: Applicant Checklist * Enter 'Y' or 'N' in applicable boxes.

<input type="checkbox"/>	I am at least 17 years old (CASR 64.015 (1) (a))
<input type="checkbox"/>	Evidence of meeting English Language Proficiency / Assessment OR
<input type="checkbox"/>	Not applicable (transition)
<input type="checkbox"/>	ADF or overseas Radio Licence/Certificate certified copy attached OR
<input type="checkbox"/>	Not applicable
<input type="checkbox"/>	Online payment receipt attached (initial issue) OR
<input type="checkbox"/>	Payment Authorisation completed (cheque or money order attached if applicable) (initial issue) OR
<input type="checkbox"/>	Not applicable (transition)
<input type="checkbox"/>	All sections of the form are completed and I have signed the application declaration

Section E: Applicant Declaration *

I hereby certify that all statements in this application are true and correct in every particular and that I have read and understood all regulatory references included in this application. I consent to CASA using and disclosing my personal information in accordance with CASA's privacy policy including exchanging the information with Commonwealth, State and Territory government agencies (see [CASA's Privacy Policy](#)). I have attached all required documentation specified in the applicant checklist and acknowledge that to knowingly make a false statement is an offence against the *Criminal code Act 1995*.

I authorise CASA to send a copy of all communications regarding THIS application to **my training provider**.

Contact name: _____ Contact email: _____

Applicant Signature: _____	Date: ___ / ___ / ___
----------------------------	-----------------------

--	--	--	--	--	--	--	--

Payment Authorisation

Note: You do not need to complete this page if you are applying for the transition of an existing permission.

Payment made online *Attach printed receipt and do not complete remainder of this page.*

Applicant Details *

Surname:		Given Names:	
Mobile:*		Email:*	

* These details will be used to follow-up payment issues only. These details will NOT be updated in CASA's database.

Licence Fees *

Fee Code	Description	Total
<input type="checkbox"/> 24.6 075	Issue of an Aeronautical Radio Operator Certificate – processing and consideration	\$ 50
Total Cost:		\$ _____

Details of Third Party Payment

Individual's or Organisation's Full Name:		
Email:		
Postal Address:		
State:	Postcode:	Country:
Contact Phone:		ARN: (if applicable)

Payment Options *

- I have enclosed a Cheque or Australian Money Order (**please make cheques payable to CASA**)
- I am paying by credit card – please ensure you complete ALL details below including the card holder name and the total amount

I hereby authorise the Civil Aviation Safety Authority to debit the following amount from my:		MasterCard <input type="checkbox"/> Visa <input type="checkbox"/>												
Card Number:	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>													Expiry Date: ____ / ____
Card Holder Name (please print):		Total: \$ _____												
Signature:		Date: ____ / ____ / ____												

Submit the Payment Authorisation Form (and Cheque / Money Order / Purchase Order) with the Application Form.

- **Email** clarc@casa.gov.au
- **Mail to:** CASA Licensing and Registration Centre
 CASA
 GPO Box 2005
 CANBERRA ACT 2601
- **Fax to:** 1300 737 187

Paid Stamp

--

Receipt No:		Initial:	
-------------	--	----------	--