

PRE-APPLICATION CHECKLIST

BE WHAT YOU WANT TO BE

cqu.edu.au

CL17 Graduate Diploma of Aviation (Flight Operations)

APPLICANT INFORMATION

Full Formal Name:					
Address:					
Suburb:		State:		Postcode:	
Campus:	<input type="checkbox"/> Bundaberg	<input type="checkbox"/> Cairns	<input type="checkbox"/> Online (mixed-mode delivery)		
ARN:					
Flight Training Provider:					

CHECKLIST

<input type="checkbox"/>	Evidence of ARN attached
<input type="checkbox"/>	Evidence of ASIC attached
<input type="checkbox"/>	Evidence of Class 1 Aviation Medical attached
<input type="checkbox"/>	Evidence of Aviation ELP Test Level 6 attached

DECLARATION

You must sign this declaration otherwise your application will be returned to you

<input type="checkbox"/>	I understand that I will have to undertake flight training at a CQUniversity Approved Flight Training Provider
<input type="checkbox"/>	I understand that this course contains compulsory Residential School requirements and I am responsible for travel and accommodation costs
<input type="checkbox"/>	I understand that I will be required to purchase and wear the CQUniversity pilot uniform when on campus or at my flight provider
<input type="checkbox"/>	I understand that I will be required to purchase the AIP, Navigation Charts, Navigation equipment and a Headset in order to undertake this course
<input type="checkbox"/>	I understand that I will incur a non-refundable debt after Census Date of each term, for each unit/s that I am enrolled in
<input type="checkbox"/>	I understand that progression through the units of the this course will depend on me passing, at my own expense, the CASA PPL/CPL/IREX examinations

Applicant Signature: _____ Date: _____

Please scan and upload completed pre-application checklist to your MyCentre application with supporting documentation attached.

Alternatively, email application to: apps@cqu.edu.au

(Where possible please use your CQUniversity email account to submit your application).