



# CSG Airwing

PILOT POSITION – EXPRESSION OF INTEREST

Please fill out as much of the following as possible to be considered for Pilot opportunities with the CSG Airwing. Once completed, e-mail this form to the head pilot at [airwing@csg.com.au](mailto:airwing@csg.com.au). A resume is not required, however please feel free to attach one to the same email.

## PERSONAL:

Full Name:	
Current Address:	
E-Mail:	
Telephone:	

## SECURITY:

Do you hold an ASIC?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If yes:

Issuing Body:	
Validity:	/ /

Employment with CSG is conditional on a Northern Territory police check.

## MEDICAL:

Medical Class:	<input type="checkbox"/> Class 1 <input type="checkbox"/> Class 2
Validity:	/ /

## THEORY:

ATPL Subjects:	<input type="checkbox"/> Completed <input type="checkbox"/> Commenced <input type="checkbox"/> N/A
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**AERONAUTICAL EXPERIENCE:**

<b>Supplied hours current as of:</b>	/ /
<b>Pilot Licence Type:</b>	<input type="checkbox"/> Commercial Pilot (A) <input type="checkbox"/> Air Transport Pilot (A) <input type="checkbox"/> Commercial Pilot (H) <input type="checkbox"/> Private Pilot (H)
<b>Licence Number:</b>	
<b>Total Time:</b>	
<b>Total S/E Command:</b>	
<b>Total 300HP Engine (PA32, C210...)</b>	
<b>Total M/E Command:</b>	
<b>Total P68:</b>	
<b>Total PA31:</b>	
<b>Total Rotary:</b>	
<b>Instrument Rating:</b>	<input type="checkbox"/> Command M/E <input type="checkbox"/> Private IFR
<b>Instrument Rating Validity:</b>	/ /
<b>Navigational Aids:</b>	<input type="checkbox"/> RNAV/(GNSS) <input type="checkbox"/> DGA <input type="checkbox"/> ILS <input type="checkbox"/> LLZ <input type="checkbox"/> NDB <input type="checkbox"/> VOR

**OTHER DETAILS:**

Please briefly list any other qualifications to support your application:

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Thank You.