



PRE-REGISTRATION FORM

Fields with * are required fields. Incomplete forms will not be processed.

STEP 1 – EASA Part 66 Examination Selection

Select one or more of the following modules:

		A1	A2	B1.1	B1.2	B1.3	B1.4	B2
MODULE 1	MATHEMATICS	X	X	X	X	X	X	X
MODULE 2	PHYSICS	X	X	X	X	X	X	X
MODULE 3	ELECTRICAL FUNDAMENTALS	X	X	X	X	X	X	X
MODULE 4	ELECTRONIC FUNDAMENTALS			X	X	X	X	X
MODULE 5	DIGITAL TECHNIQUES / ELECTRONIC INSTRUMENT SYSTEMS	X	X	X	X	X	X	X
MODULE 6	MATERIALS AND HARDWARE	X	X	X	X	X	X	X
MODULE 7A *	MAINTENANCE PRACTICES	X	X	X	X	X	X	X
MODULE 7B	MAINTENANCE PRACTICES							
MODULE 8	BASIC AERODYNAMICS	X	X	X	X	X	X	X
MODULE 9A *	HUMAN FACTORS	X	X	X	X	X	X	X

		A1	A2	B1.1	B1.2	B1.3	B1.4	B2
MODULE 9B	HUMAN FACTORS							
MODULE 10*	AVIATION LEGISLATION	X	X	X	X	X	X	X
MODULE 11A	TURBINE AEROPLANE AERODYNAMICS, STRUCTURES AND SYSTEMS	X		X				
MODULE 11B	PISTON AEROPLANE AERODYNAMICS, STRUCTURES AND SYSTEMS		X		X			
MODULE 11C	PISTON AEROPLANE AERODYNAMICS, STRUCTURES AND SYSTEMS							
MODULE 12	HELICOPTER AERODYNAMICS, STRUCTURES AND SYSTEMS					X	X	
MODULE 13	AIRCRAFT AERODYNAMICS, STRUCTURES AND SYSTEMS							X
MODULE 14	PROPULSION							X
MODULE 15	GAS TURBINE ENGINES	X		X		X		
MODULE 16	PISTON ENGINES		X		X		X	
MODULE 17A	PROPELLER	X	X	X	X			X
MODULE 17B	PROPELLER							

** Module 7A, 9A and 10 have Multiple-choice and Essay examinations. Essay 1 and Essay 2 examinations for Module 7A, can be re-examined separately.*

STEP 2 –Examination date(s) proposal(s)

Specify preferred and alternative date for examination per selected module. Select “Upon a Proposed schedule”, if you would like us to propose an examination schedule for you.

Module*:	MCQ:	ESSAY	Examination date*:	Alternative date:
	<input type="checkbox"/>	<input type="checkbox"/>		
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	<input type="checkbox"/>	<input type="checkbox"/>		
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Upon a Proposed Schedule.

STEP 3 – Student details

ID/Passport No*: Date of birth*:

Country of birth*:

City of birth*:

Full Name(s)*:

Mr Ms Mrs

E-mail*:

Telephone nbr*: (Country code) (Phone number)

Address*: (Street)

(Number) (Postal code)

(City + Country)

STEP 4 – Company information (optional)

Company Name:

Company Address: (Street)

(Number) (Postal code)

(City + Country)

Company VAT number:

PO number:

Company Website:

STEP 5 – Payment options

Please select one of the options for payment of the fee*:

Invoice¹⁾ Credit card Online Payment Link

¹⁾ You will receive an invoice that can be paid by bank wire transfer. Please provide company PO number in step 4 (if applicable).

STEP 6 – Comments/Remarks

Comments/Remarks:

STEP 5 – Finalize

Contact Us

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