



ACCEPTANCE OF NOMINATED MANAGEMENT PERSONNEL

Competent Authority: UAE Military Airworthiness Authority (MAA)

1. DETAILS OF MANAGEMENT POSITION TO BE ACCEPTED AS SPECIFIED IN:

UAEMAR 145

UAEMAR M

UAEMAR 21

2. POSITION WITHIN THE ORGANISATION

UAEMAR 145	UAEMAR M	UAEMAR 21J	UAEMAR 21G
<input type="checkbox"/> AM	<input type="checkbox"/> AM	<input type="checkbox"/> Chief Executive	<input type="checkbox"/> AM
<input type="checkbox"/> RM	<input type="checkbox"/> CAM	<input type="checkbox"/> HDO	<input type="checkbox"/> RM
<input type="checkbox"/> QM	<input type="checkbox"/> QM	<input type="checkbox"/> COA	<input type="checkbox"/> QM
<input type="checkbox"/> NDT Level 3	<input type="checkbox"/> AwR Staff	<input type="checkbox"/> CISM	<input type="checkbox"/> Prod. Manager

Additional information

3. NOMINEE DETAILS

3.1	FORM 4 Holder Reference No. (if previously issued)	UAE.MAA.FORM_4.[XXXXXX]
3.2	Title/Name	
	Address	
	Suburb	
	Emirate or State	
	Country	
	Work Phone	
	Mobile	
	Email	
	Emirates ID	



UNITED ARAB EMIRATES
MINISTRY OF DEFENCE

UNITED ARAB EMIRATES MILITARY AIRWORTHINESS AUTHORITY

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4. NOMINEE ORGANISATION

4.1	Organisation Name	
4.2	Approval Certificate Reference (provide only one organisation reference relevant to nominee position)	UAE.MAA.M.[XXXX] UAE.MAA.21.[XXXX] UAE.MAA.145.[XXXX]

5. QUALIFICATIONS RELEVANT TO THE SECTION (2) POSITION: (Attach supporting documentation)

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6. EXPERIENCE RELEVANT TO THE SECTION (2) POSITION: (Attach supporting documentation)

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7. POST HOLDER DECLARATION (To be completed by the Applicant)

7.1 Declaration

- I declare that the information provided on this form is true and correct.
- I understand and accept that in order for MAA to process this application, all relevant supporting documentation has been supplied.

Name

Position

Signature

Date

*On completion, send form and documentation as *Staff-in-Confidence* to MAA at UAEMAA@mod.gov.ae

8. MAA USE ONLY

8.1 Record File Reference

8.2 Issue Form 4 Reference (if initial issue required)

8.3 Surveyor Assessment:
I have assessed this application against the requirements of the UAEMAR and recommend it as:

- Accepted
 Accepted with Conditions
 Resubmit Required
 Not Accepted

Assessment Comments

Name

Position

Signature

Date

8.4 Head of Compliance Section

- Accepted
 Accepted with Conditions
 Resubmit Required
 Not Accepted

Conditions (if applicable)

Name

Position

Signature

Date

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