



CACE Registration Form Selection tests Airline Transport Pilot

LAST NAME : _____ MIDDLE NAME : _____ FIRST NAME : _____

STREET+NUMBER : _____

CITY CODE,CITY AND COUNTRY : _____

DATE OF BIRTH : _____ PLACE OF BIRTH : _____

COUNTRY OF CITIZEN SHIP : _____

IDENTITY CARD NUMBER : _____ IDENTITY CARD VALID UNTIL : _____

PHONE : _____ MOBILE : _____

LANGUAGE : _____ SEX : MALE FEMALE

E MAIL : _____

Place choosen for your test :

Guadeloupe

Martinique

région parisienne

Please check if you send us all necessary documentation together with this registration form :

- Copy identity card /passport
- Motivaion letter
- Personnal CV
- Copy of medical class 2
- Proof of payement
- Copy of high school diploma or other

The following documents can be sent later.You need to present them at the latest when starting the training (when you've been accepted):

The required education certificates:

- A copy of your diploma from high school (secondary education/BAC).
- A copy of the diploma's you've obtained after high school.

Evidence of good behaviour:

“extrait de casier judiciaire” or “Certificat de bonne vie et mœurs” in french.

Copy of medical certificate Class 2 :

Make already an appointment and add the mail to the rest of the documentation you need to send with this registration form. Please schedule your medical appointment class 1 at least one month before the beginning of the class at

DATE : _____ SIGNATURE : _____

ANY QUESTIONS / REMARKS (french or english) :

Please fill out this document and mail it before 19th July 2015 together with the necessary documents to **contacts.cace@gmail.com**



**Banque des
Antilles Françaises**

IBAN : FR76 4183 9000 1051 1749 5902 073

BIC : BDAFGPGXXXX

Any transfer has to be to accompany with the name of the beneficiary

***Le virement doit être accompagner du nom du bénéficiaire si nom différent de l'émetteur de celui-ci ***