

## AIRWORTHINESS REVIEW STAFF ASSESSMENT CHECKLIST

(A) DETAILS OF PERSONNEL	
1. NAME	
2. DEPARTMENT	
3. STAFF NO	
4. POSITION	
5. AIRCRAFT RATING APPLIED FOR	
6. DATE OF ASSESSMENT	

(B) QUALIFICATION, TRAINING AND EXPERIENCE						
NO	ITEM	CRITERIA	COMPLIANCE			REMARKS
			YES	NO	N/A	
1.	Qualification	At least five years' experience in aircraft maintenance field and/or continuing airworthiness activities AND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		An appropriate license in compliance with CAD 1801 OR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		Relevant engineering degree acceptable to CAAM AND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		Formal aeronautical maintenance training AND	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		A position within company with appropriate responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Training	CAAM Part M – Continuing Airworthiness Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		Continuing Airworthiness Management Exposition (CAME)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		Continuing Airworthiness Management Procedure (CAMP)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		Human Factor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		Air Legislation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		EWIS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		Fuel Tank Safety & CDCCL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		CAMS (Aeronet)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		Aircraft General Familiarisation Level 1 Category C Type Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Experience	Be involved in CAMO activities for at least 6 months in every two-year period	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		Conduct at least one (1) airworthiness review in the last twelve-month period.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

(C) COMPETENCY ASSESSMENT					
NO	ITEMS	COMPETENCY			REMARKS
		YES	NO	N/A	
1.	General knowledge of applicable officially recognised standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Awareness of auditing techniques, planning, conducting and reporting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Knowledge of Human Factor, human performance and limitations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Relevant knowledge of .Part-M and any other relevant regulation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Knowledge of relevant parts of the related continuing airworthiness management exposition (CAME) and associated procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.	Knowledge of occurrence reporting system and understanding of the importance of reporting occurrences, incorrect maintenance data and existing potential defects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.	Knowledge of safety risk linked to Human Factor and working environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.	Understanding of professional integrity, behavior and attitude towards safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9.	Understanding of conditions for ensuring continuing airworthiness of aircraft and components	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10.	Understanding of personnel authorisation and limitations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11.	Ability to control completed work sheets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12.	Ability to determine required qualifications of task performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13.	Ability to identify existing and potential unsafe conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14.	Ability to determine proper accomplishment of maintenance task	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15.	Ability to identify and understanding of critical tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16.	Ability to priorities and report discrepancies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17.	Ability to recognize the acceptability of parts to be installed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18.	Ability to understand work sheets and use applicable maintenance data	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19.	Ability to use information system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20.	Adequate communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**(D) CONCLUSION**

Is the personnel competent? YES  NO

If No, state the reason:

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If satisfactory please tick the boxes below:

<input type="checkbox"/>	I hereby certify that person, for which particular are given in block A, is qualified and competent to perform function of Airworthiness Review Staff and he/she has been provided with required trainings and fulfilled the requirements as stated in Continuing Airworthiness Management Exposition and CAAM CAD 6801 and 6802.
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Remarks:

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**(E) ASSESSMENT CARRIED OUT BY:**

ASSESSOR	NAME	SIGNATURE	DATE
1.			
2.			