

# Aviation Security Training – Quality Assurance Framework Registered Training Provider Change of Details



This form should be completed by the Registered Training Provider to amend details from the QAF Annual Registration for either the Training Provider or any linked Certificated Instructors (This includes linking new Instructors, de-linking of Instructors and amendments to an Instructor’s certification).

**Note: It is the responsibility of the Registered Training Provider to notify the CAA of any Certificated Instructors who have linked or de-linked from the Registered Training Provider. This will be checked during Quality Assurance visits by the EQA.**

## Section 1a Registered Training Provider details

Name: ..... TP# .....

Contact name: .....

Email address: .....

Telephone number: .....

Date of completion: .....

## Section 1b Syllabus delivery for Training Provider

Please indicate all syllabuses as a Training Provider you are delivering since registration (or any new syllabuses you are adding in the current Quality Assurance Framework year).

Ground Security	<input type="checkbox"/>	Aircrew Security	<input type="checkbox"/>	GSAT	<input type="checkbox"/>
Ground Security Supervisor	<input type="checkbox"/>	IFS	<input type="checkbox"/>	Hold Baggage Reconciliation	<input type="checkbox"/>
ASM	<input type="checkbox"/>	Cargo (Regulated Agent)	<input type="checkbox"/>	Aircraft Security	<input type="checkbox"/>
Airport Supplies	<input type="checkbox"/>	Cargo (Known Consignor)	<input type="checkbox"/>		

## Section 2a Certificated Instructors to be Linked

This section must be completed for all Certificated instructors who have recently linked to the Registered Training Provider. It is the responsibility of the Training Provider to keep records of qualifications and complete quality assurance on all instructors linked to the Training Provider.

CIN Number (If known)..... Name: .....

Email address: .....

Telephone number.....

Tick box if awaiting confirmation of CIN number from CAA

If you are currently linked to any other Registered Training Providers, please provide their details and training provider number:

.....

.....

**Section 2b Syllabus delivery for Certificated Instructors**

Please select current syllabuses the Certificated Instructor can deliver (or any new syllabuses the Instructor requires under their certification).

Ground Security	<input type="checkbox"/>	Aircrew Security	<input type="checkbox"/>	GSAT	<input type="checkbox"/>
Ground Security Supervisor	<input type="checkbox"/>	IFS	<input type="checkbox"/>	Hold Baggage Reconciliation	<input type="checkbox"/>
ASM	<input type="checkbox"/>	Cargo (Regulated Agent)	<input type="checkbox"/>	RFX Instructor	<input type="checkbox"/>
Airport Supplies	<input type="checkbox"/>	Cargo (Known Consignor)	<input type="checkbox"/>	Aircraft Security	<input type="checkbox"/>

**Section 3 Certificated Instructors to be De-Linked**

This section must be completed for all Certificated Instructors who have recently de-linked from the Registered Training Provider. By de-linking an Instructor, that Instructor no longer works for or completes training for the Registered Training Provider.

CIN Number ..... Name: .....

CIN Number ..... Name: .....

CIN Number ..... Name: .....

**Please note that Certificated Instructors have 6 months to re-register with another Training Provider, during this time your CIN will be suspended, and you are unable to design, assess or deliver training. After the 6-month period, your CIN will be withdrawn.**

Please submit the completed form to [avsec.ga@caa.co.uk](mailto:avsec.ga@caa.co.uk). By returning this form you consent to the CAA holding / amending your details for the purpose of registration as a Registered Training Provider for Aviation Security.