



1. Details of Management Personnel required to be accepted as specified in Part-				
2. Title / First Name / Surname:				
To complete a text box, right click the box, choose 'Text B				
3. Position within the Organisation	<u>n:</u>			_
4. Qualifications relevant to the ite	em (3) position:			_
Use Shift+Return to start a new line in the text box.				
5. Work experience relevant to the	e item (3) nosition:			
5. Work experience relevant to the	s item (b) position.			
,				_
6. Organisation:				
7. Approval Number relevant to th	e item (1):			
Signature:	Date:			
Civil Aviation Authority of Kosovo	use only			
Name and signature of authori	sed competent authority	staff member	accepting	this
person:				
Signature:	Date:	1		
	_			
Name:	Office:			

CAAK/FSD/EASA-Form 4