**Part 66 Required Training Plan**

Name of Student

Email Contact Details

Please complete as applicable Column 3, Column 5 and Column 7 with the provided information we will be able to make you a detailed offer for your final consideration – Indicate with Y for Yes if you wish to receive a specific quotation. (note the multi attendance discounts which are applicable) After the form is filled please send it to office@sassofia.com

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Column 1** | **Column 2** | **Column 3** | **Column 4** | **Column 5** | **Column 6** | **Column 7** |
| **Module No**  | **EASA Online Training Available**  | **Please Indicate Modules Required for Online Training** | **Classroom Review Delivery Dates****Please indicate the dates and location for the next training** | **Please Indicate Modules Required for Classroom Training** | **Classroom 147 Examination Please indicate the date and Location for Next Exam**  | **Please Indicate Modules Required for EASA 147 Module Exam**  |
| 1 |  |  | 15-16.05.2017 – Bangkok |  | 05.06.2017 - Bangkok |  |
| 2 |  |  | 17-19.05.2017 – Bangkok |  | 05.06.2017 - Bangkok |  |
| 3 |  |  | 22-24.05.2017 - Bangkok |  | 06.06.2017 - Bangkok |  |
| 4 |  |  | 25-26.05.2017 – Bangkok |  | 06.06.2017 - Bangkok |  |
| 5 |  |  | 29.05-01.06.2017 – Bangkok |  | 07.06.2017 - Bangkok |  |
| 6 |  |  |  |  |  |  |
| 7A |  |  |  |  |  |  |
| 7B |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9A |  |  |  |  |  |  |
| 9B |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |
| 11A |  |  |  |  |  |  |
| 11B |  |  |  |  |  |  |
| 11C |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  |
| 16 |  |  |  |  |  |  |
| 17A |  |  |  |  |  |  |
| 17B |  |  |  |  |  |  |