

The following information can be found on the FAA's Website at:
http://www.faa.gov/licenses_certificates/airmen_certification/foreign_license_verification/



**Federal Aviation
Administration**

Airmen Certification: Verify the Authenticity of a Foreign License, Rating, or Medical Certification

Foreign License

If you are applying for a certificate issued on the basis of a foreign license under the provisions of:

- 14 CFR Part 61, Section 61.75
- special purpose pilot authorizations under Section 61.77
- using a pilot certificate issued under Section 61.75 to apply for a commercial pilot certificate under Section 61.123 (h)
- applying for an airline transport pilot certificate issued under Section 61.153 (d) (3)
- applying for a certificate issued on the basis of a foreign license under the provisions of 14 CFR Part 63, Sections 63.23 and 63.42

Then you must have the Civil Aviation Authority (CAA) that issued those certificates verify the validity and currency of the foreign license and medical certificate or endorsement before you apply for an FAA certificate or authorization.

Send Us Your Information

You can provide the required information using the optional [Verification of Authenticity of Foreign License, Rating, and Medical Certification](#) (PDF) form.

You can send us the form and the preferred documents two ways:

By Mail

Federal Aviation Administration
Airmen Certification Branch, AFS-760
P.O. Box 25082
Oklahoma City, OK 73125-0082

By Fax

(405) 954-9922

NOTE: If your application and documentation for foreign verification is received with missing and/or illegible information, you will be notified and required to resend your application and all required documentation by mail.

You can't send the pre-application documents electronically.



US Department
Of Transportation

**Federal Aviation
Administration**

Verification of Authenticity of Foreign License, Rating, and Medical Certification Supplemental Information and Instructions

Paperwork Reduction Act Statement:

The information collected on this form is necessary to determine applicant eligibility for airman ratings. We estimate it will take 10 minutes to complete this form. The information collected is required to obtain a benefit and becomes part of the Privacy Act system of records DOT/FAA 847, General Air Transportation Records on Individuals. Please note that an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number associated with this collection is 2120-0724. Comments concerning the accuracy of this burden and suggestions for reducing the burden should be directed to the FAA at: 800 Independence Ave. SW, Washington, DC 20591, Attn: Information Collection Clearance Officer, ABA-20.

Privacy Act

The information on the accompanying form is solicited under authority of Title 14 of the Code of Federal Regulations (14 CFR), Part 61. The purpose of this data is to be used to identify and evaluate your qualifications and eligibility for the issuance of an airman certificate and/or rating. Submission of all requested data is mandatory, except for the Social Security Number (SSN), which is voluntary. Failure to provide all the required information would result in you not being issued a certificate and/or rating. The information would become part of the Privacy Act system of records DOT/FAA 847, General Air Transportation Records on Individuals. The information collected on this form would be subject to the published routine uses of DOT/FAA 847. Those routine uses are: (a) To provide basic airmen certification and qualification information to the public upon request. (b) To disclose information to the National Transportation Safety Board (NTSB) in connection with its investigation responsibilities. (c) To provide information about airmen to Federal, state, and local law enforcement agencies when engaged in the investigation and apprehension of drug violators. (d) To provide information about enforcement actions arising out of violations of the Federal Aviation regulations to government agencies, the aviation industry, and the public upon request. (e) To disclose information to another Federal agency, or to a court or an administrative tribunal, when the Government or one of its agencies is a party to a judicial proceeding before the court or involved in administrative proceedings before the tribunal.

**Instructions for Completing the Form for
Verification of Authenticity of Foreign License, Rating, and Medical Certification**

Basic Airman Information

Block 1. Name: Last, First, Middle. Enter all names that appear on your foreign pilot certificate.

Block 2. Date of Birth: Enter eight digits. Use numeric characters, i.e., 07-09-1940. DOB is the same as it appears on the foreign license and medical certificate.

Block 3. Place of Birth.: Enter the name of the city and country where you were born.

Block 4. Address: Enter the address you want your copy of the verification letter mailed to.

Block 5. City, State, Zip code (Country if applicable)

Block 6. Citizenship: Enter the country where you are a citizen.

Certificate or Rating Applied for on Basis of:

Block 7a. Country: Enter name of ICAO country that issued your license.

Block 7b. Grade of License: Enter the grade of license issued, i.e., private pilot, commercial pilot, etc.

Block 7c. Number: Enter the certificate number that appears on your license.

Block 7d. Ratings: Enter all ratings that appear on your license.

Block 8. Is your foreign license under an order of revocation or suspension by the foreign country that issued your license? Check yes or no.

Block 9. Do you hold a Current Foreign Medical Certificate or Endorsement? Check yes or no.

Block 9a. Class of certificate: Enter the class of the foreign medical certificate or endorsement.

Block 9b. Date issued: Enter the date the foreign medical certificate or endorsement was issued.

Block 9c. Date expired: Enter the expiration date of the foreign medical certificate or endorsement.

Block 9d. Name of Examiner: Enter the name of person as shown on foreign medical certificate or endorsement.

Block 10. Please provide the U.S. certificate and rating you will be applying for.

Block 11. Please provide the location of the Flight Standards District Office (FSDO) where you intend to make application. Enter the location of the FSDO from the list provided so your verification can be provided to that FSDO. Please do not provide location of flight school, employer or Airmen Certification Branch, AFS-760.

Signature of Applicant: Sign your full name.

EMAIL Address if applicable.

Telephone number where you can be reached if applicable.

Enter the date you sign the Verification of Authenticity of Foreign License, Rating, and Medical Certification form.

Attachments: Please include a copy of your foreign pilot license and medical license or endorsement. Include copies of English transcription of license, if applicable.



Verification of Authenticity of Foreign License, Rating, and Medical Certification

Basic Airman Information

1. Name as it appears on your foreign license. <div style="display: flex; justify-content: space-between; font-size: small;"> Last First Middle </div>	2. Date of Birth <div style="display: flex; justify-content: space-between; font-size: small;"> Month Day Year </div>	3. Place of Birth
4. Address you want your copy of the verification letter mailed to. 		
5. City, State, Zip Code (Country if applicable)		6. Citizenship

Certificate or Rating Applied For on Basis of:

7. Foreign License Issued by	7a. Country	7b. Grade of License	7c. Number	
7d. Ratings (Enter all ratings that appear on your foreign license) 				
8. Is your foreign license under an order of revocation or suspension by the foreign country that issued your license? <div style="text-align: right; font-size: small;"> Yes <input type="checkbox"/> No <input type="checkbox"/> </div>				
9. Do you hold a Current Foreign Medical Certificate or Endorsement? Yes <input type="checkbox"/> No <input type="checkbox"/>	9a. Class of Certificate	9b. Date Issued	9c. Date Expired	9d. Name of Examiner
10. Please provide the U.S. certificate and rating you will be applying for: 				
11. Please provide the location of the Flight Standards District Office (FSDO) where you intend to make application. (Select FAA FSDO from list provided. Please do not provide location of flight school, employer, or Airmen Certification Branch, AFS-760.) 				
Telephone number where you can be reached			EMAIL Address	
Applicant's Certification – I certify that all statements and answers provided by me on this application form are complete and true to the best of my knowledge and I agree that they are to be considered as part of the basis for issuance of my FAA certificate to me. I authorize the issuing CAA to provide all pertinent information to the FAA. I have also read and understand the Privacy Act statement that accompanies this form.				
Signature of Applicant			Date	
Attachments Must Include All of the Following: <div style="display: flex; justify-content: space-around; font-size: small;"> <input type="checkbox"/> Copy of Foreign License <input type="checkbox"/> Copy of Medical License or Endorsement <input type="checkbox"/> Copy of English Transcription of License (If Applicable) </div>				

ATP Training Center Location (Airport ID)	FSDO Name and Address
<p style="text-align: center;">Atlanta, GA (FTY and LZU)</p>	<p>Atlanta FSDO Campus Bldg. 2-110 1701 Columbia Park, GA 30337-2747 Ph. (404) 305-7200</p>
<p style="text-align: center;">Birmingham, AL (JFX)</p>	<p>Birmingham FSDO 1500 Urban Center Drive, Suite 205 Vestavia Hills, AL 35242 Ph. (205) 734-1557</p>
<p style="text-align: center;">Bowling Green, KY (BWG)</p>	<p>Louisville FSDO 1930 Bishop Lane, 11th Floor Louisville, KY 40218-1921 Ph. (502) 582-6116</p>
<p style="text-align: center;">Daytona Beach, FL (DAB)</p>	<p>Orlando FSDO 5950 Hazeltine National Drive Citadel International, Suite 500 Orlando FL 32822-5023 Ph. (407) 812-7700</p>
<p style="text-align: center;">Dallas, TX (GKY - ONLY)</p>	<p>Fort Worth FSDO 2221 Alliance Blvd., Suite 400 Fort Worth, TX 76177-4300 (817)491-5000</p>
<p style="text-align: center;">Dallas, TX (ADS - ONLY)</p>	<p>Dallas FSDO 1431 Greenway Drive Suite 1000 Irving, Texas 75038 (972) 582-1800</p>
<p style="text-align: center;">Ft. Lauderdale, FL (FLL)</p>	<p>Fort Lauderdale FSDO 1050 Lee Wagener Blvd. Fort Lauderdale FL 33315 Ph. (954) 356-7520</p>

Houston, TX (DWH)	Houston FSDO 13100 Space Center Blvd. Suite 5400 Houston TX 77059-3598 Ph. (281) 212-9700
Jacksonville, FL (CRG)	Orlando FSDO 5950 Hazeltine National Drive Citadel International, Suite 500 Orlando FL 32822-5023 Ph. (407) 812-7700
Las Vegas, NV (VGT)	Las Vegas FSDO 7181 Amigo Street, Suite 180 Las Vegas NV 89119 Ph. (702) 269-1445
Long Beach, CA (LGB)	Long Beach FSDO 5001 Airport Plaza Drive, Suite 100 Long Beach CA 90815 Ph. (562) 420-1755
Panama City, FL (PFN)	Birmingham FSDO 1500 Urban Center Drive, Suite 205 Vestavia Hills, AL 35242 Ph. (205) 734-1557
Phoenix, AZ (IWA)	Scottsdale FSDO 17777 N. Perimeter Drive, Suite 101 Scottsdale, AZ 85255 Ph. (480) 419-0111
Raleigh Durham (RDU)	Greensboro FSDO 6433 Bryan Blvd. Greensboro, NC 27409 Ph. (366) 662-1000

Richmond, VA (RIC)	Richmond FSDO Richmond Intl. Airport 5707 Huntsman Road, Suite 100 Richmond, VA 23250-2415 Ph. (804) 222-7494
Riverside, CA (RAL)	Riverside FSDO 6961 Flight Road Riverside, CA 92504 Ph. (909) 276-6701
Sacramento, CA (SAC)	Sacramento FSDO 6650 Belleau Wood Lane Sacramento, CA 95822 Ph. (916) 422-0272
Stuart, FL (SUA)	Fort Lauderdale FSDO 1050 Lee Wagener Blvd. Fort Lauderdale, FL 33315 Ph. (954) 356-7520
Trenton, NJ (TTN)	Philadelphia FSDO 2 International Plaza, Suite 110 Philadelphia, PA 19113 Ph. (610) 595-1500