

**Paperwork Reduction Act Statement:**The information collected on this form is necessary to ensure that Aviation Maintenance Technician Schools meet the minimum requirements for the procedures and curriculum set forth by the FAA in FAR Part 147. The information will be used to determine applicant eligibility and compliance. Then all requirements have been met, an aviation maintenance technician school certificate with appropriate ratings is issued. It is estimated that it will take each applicant between 40 and 80 hours to complete this form and provide all the information called for. information is required to obtain a certificate. There is no confidentiality provided. Not 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 control number for this collection is 2120-0040. 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, ASP-110



U S Department of Transportation  
Federal Aviation Administration

## AVIATION MAINTENANCE TECHNICIAN SCHOOL CERTIFICATE AND RATINGS APPLICATION

**INSTRUCTIONS:** Type or print in ink. Submit original and two copies of this form (complete this side ONLY) and two copies of all attachments to the nearest FAA General Aviation District Office or Air Carrier District Office as set forth in Federal Aviation Regulations, Part 147.

1. NAME OF SCHOOL Pima County Community College	2. TELEPHONE NO. (520) 206-5907
3. ADDRESS (Number, street, city, state, & ZIP Code) 7211 South Park Ave. Tucson, AZ. 85709	4. TRAINING DIRECTOR  Jason Bowersock

5. APPLICATION SUBMITTED FOR (Check as applicable)	6. RATING(S) APPLIED FOR AND TOTAL HOURS PER COURSE	7. MAXIMUM NO. OF STUDENTS ENROLLED AT ANY ONE TIME
<input type="checkbox"/> ORIGINAL CERTIFICATE	<input checked="" type="checkbox"/> RATINGS	DAY
<input type="checkbox"/> CHANGE IN RATING (Specify)	AIRFRAME (A) 1290	EVENING
<input type="checkbox"/> CHANGE IN OWNERSHIP (Specify)	<input checked="" type="checkbox"/> POWERPLANT (P) 760	250
<input type="checkbox"/> CHANGE IN LOCATION, FACILITIES, AND EQUIPMENT (Specify)	A&P 2050	250
<input checked="" type="checkbox"/> CHANGE IN ENROLLMENT (Specify) <small>Increase enrollment from 150 to 250. One new hangar, five new classrooms, and five new labs have been added to accommodate increased enrollment. There are now a total of two hangars, eight labs, and 10 classrooms available for instruction.</small>	<b>7A. MAXIMUM TOTAL SCHOOL ENROLLMENT</b>	
<input type="checkbox"/> OTHER (Specify)	250	
<b>8. SCHOOL STATUS (Check as applicable)</b>		
<input checked="" type="checkbox"/> PUBLIC	<input type="checkbox"/> PRIVATE	<input checked="" type="checkbox"/> NON-PROFIT
<b>9. SCHOOL LOCATION (Check as applicable)</b>		
<input checked="" type="checkbox"/> ON AIRPORT	<input type="checkbox"/> IN CITY	<input type="checkbox"/> IN SUBURBS

10. COURSE CHARACTERISTICS																
RATINGS	HOURS PER WEEK		WEEKS PER COURSE		INSTRUCTION HOURS PER		ENROLLMENT PERIODS PER YEAR FOR		ENTRANCE REQUIREMENTS							
	DAY	EVENING	DAY	EVENING	DAY	EVENING	DAY	EVENING	PHYSICAL		SCHOLASTIC					
									YES	NO	YES	NO	YES	NO	YES	NO
AIRFRAME (A)	40	40	5	5 or 16	8	8	3	3	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
POWERPLANT (P)	40	40	5	5 or 16	8	8	3	3	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
A & P	40	40	5	5 or 16	8	8	3	3	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	

11. ATTACHMENTS (Check applicable items)	
<input type="checkbox"/> A. PROPOSED CURRICULUM	E. LIST OF REQUIRED PRACTICAL PROJECTS
<input type="checkbox"/> B. LIST OF FACILITIES AND EQUIPMENT TO BE USED	F. SCHEDULE OF REQUIRED TESTS
<input checked="" type="checkbox"/> C. PHOTOGRAPHS OF FACILITIES	G. COPY OF STUDENT RECORD SYSTEM
<input type="checkbox"/> D. LIST OF INSTRUCTORS- NAMES, CERTIFICATE NOS., TYPE, AND RATINGS HELD, AND SUBJECTS TO BE TAUGHT	H. OTHER (Specify)

12. APPLICANT'S CERTIFICATION
NAME OF OWNER (Include name(s) of individual owner, all partners, or corporation name giving State and date of incorporation) Pima County Community College

I hereby certify that I have been authorized by the school identified in item 1 to make this application and that statements and attachment hereto are true and correct to the best of my knowledge.

DATE 09/21/2022	TITLE Director of Aviation	AUTHORIZED SIGNATURE Jason Bowersock
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13. CERTIFICATION ACTION (FOR FAA USE ONLY)							
ACTION	CERTIFICATE NO. ASSIGNED	RATINGS	INDICATE RATING(S) ISSUED		APPROVED MAXIMUM ENROLLMENT FOR		
			DAY	EVENING	DAY	EVENING	
<input checked="" type="checkbox"/>	APPROVED	IZPT564X	AIRFRAME (A)	X	X	250	250
	DISAPPROVED	FAA FORM 8310-4 FORWARDED ON	POWERPLANT (P)	X	X	250	250
			A&P	X	X	250	250

REMARKS
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14. DATE CERTIFICATE ISSUED  09/21/2022	15. OFFICE IDENTIFICATION  AFG-SDL-FSDO-07	16. ISSUING OFFICIAL'S SIGNATURE  Randy Lee Weese <small>Digitally signed by Randy Lee Weese Date: 2022.09.21 08:30:38 -07'00'</small>
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## AVIATION MAINTENANCE TECHNICIAN SCHOOL INSPECTION REPORT

(FOR FAA USE ONLY)

INSTRUCTIONS: The items listed below are applicable to certification inspection and/or to surveillance. Complete each item. If an item is not applicable indicate entry as "NA".

1. NAME OF SCHOOL	2. CERTIFICATE NO.	<b>3. TYPE OF INSPECTION AND DATE</b>		
		SESSION	SURVEILLANCE	CERTIFICATION
		DAY		
		EVENING		

**4. SCHOOL CHARACTERISTICS**

SESSION	a. PRESENT ENROLLMENT			b. TOTAL NUMBER OF INSTRUCTORS		c. MAXIMUM HRS. TRAINING PER WEEK PER STUDENT <i>(Exclusive of lunch or rest periods)</i>			d. RATINGS APPLIED FOR OR NOW IN EFFECT			e. DATE OF APPROVAL FOR CURRICULUM NOW IN USE		
	AIRFRAME	POWER-PLANT	A&P	CERTIFICATED	NONCERTIFICATED	AIR-FRAME	POWER-PLANT	A&P	AIR-FRAME	POWER-PLANT	A&P	AIR-FRAME	POWER-PLANT	A&P
DAY														
EVENING														

5. How many students were graduated during the previous 12 months?								AIRFRAME (A)	POWERPLANT (P)	A&P
6. Instructor/student ratio.		a. Classroom						1 to	1 to	1 to
		b. Shop						1 to	1 to	1 to
7. Number of hours in approved curriculum.								Hrs.	Hrs.	Hrs.

8. Is certificate current and properly displayed?	YES	NO
9. Does the curriculum in use meet the requirements of FAR 147?		
10. Is the approved curriculum actually being followed?		
11. Do facilities and equipment continue to meet the certification requirements of FAR 147?		
12. Are necessary materials, tools, and equipment available and serviceable for training?		
13. Is there a sufficient number of qualified instructors?		
14. Has there been any change in instructor or administrative personnel since the last inspection? <i>(If "YES," explain in Remarks)</i>		
15. Is classroom and shop space suitable for courses given and number of students?		
16. Are the instructional aids <i>(mockups, projectors, charts, films, etc.)</i> current, specifically applicable to the curriculum, and sufficient for all phases of training?		
17. Are there sufficient copies of FAR's, manufacturer's instructions, etc.?		
18. Have proper safety measures been taken to insure protection of students operating hazardous equipment including facilities for running engines?		
19. Are student records current and do they reflect:		
a. Daily actual hours students have been in class?		
b. Progress through courses in the curriculum including accomplishment of laboratory and shop projects?		
c. Grades for all courses including quizzes, tests, and practical projects?		

20. REMARKS AND ITEMS TO FOLLOW UP ON NEXT INSPECTION *(Use additional sheets if more space is needed)*

<b>21. INSPECTION RESULTS</b>	<b>22. OFFICE IDENTIFICATION</b>	<b>23. INSPECTOR'S SIGNATURE</b>
SATISFACTORY		
UNSATISFACTORY		
OTHER		



DESERT VISTA CAMPUS

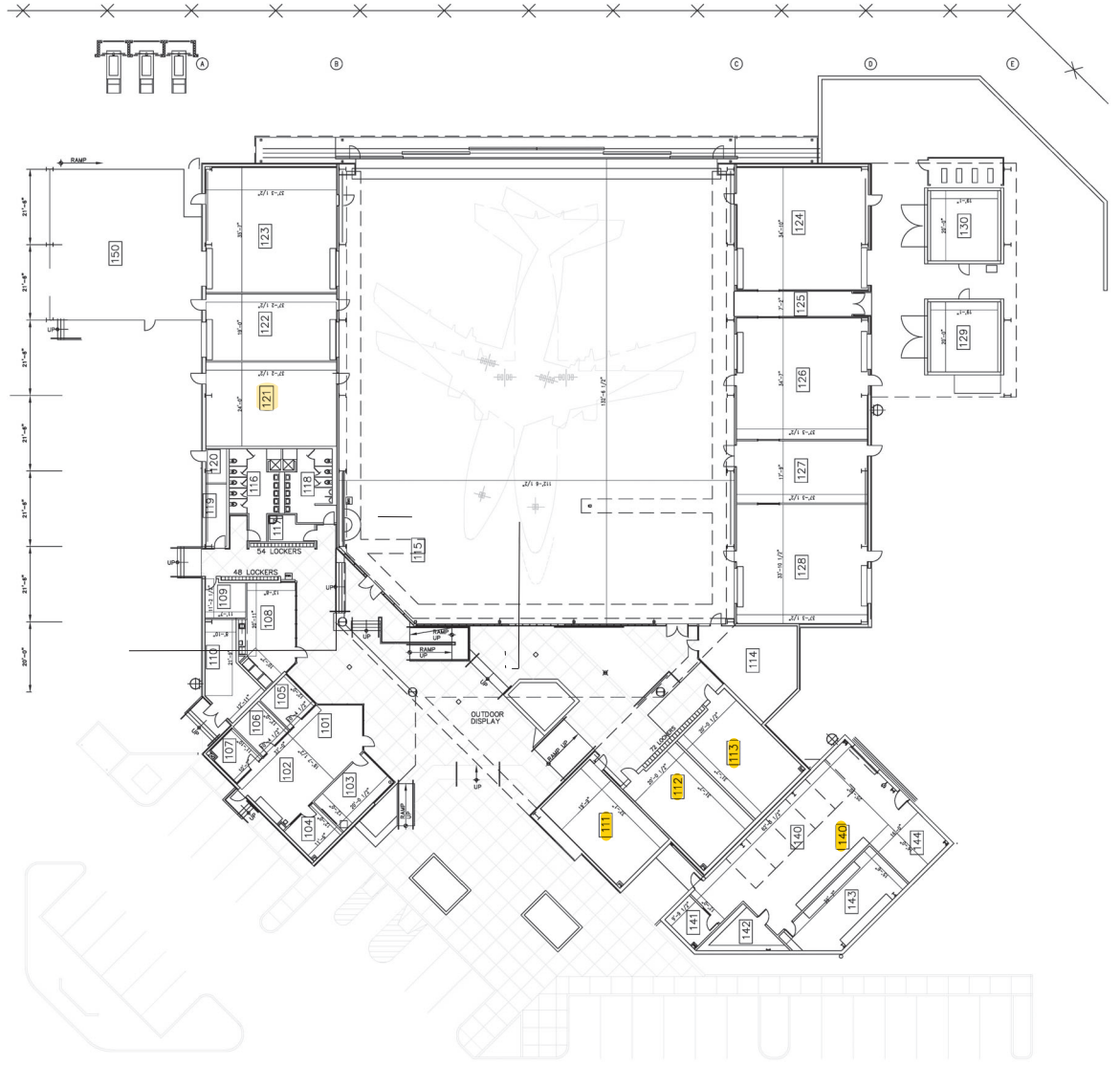
ATC

SCALE 1/16" = 1'-0"

AVIATION TECHNOLOGY CENTER



5 0 4 8 12 16 24 32



**PIMA COMMUNITY COLLEGE**  
**AVIATION TECHNOLOGY CENTER EXPANSION**  
**BUILDING PACKAGE**

7211 SOUTH PARK AVE. TUCSON, AZ 85709 98159 87 AT TUCSON INTERNATIONAL AIRPORT



2024 W. SHARPE BLVD.  
 TUCSON, ARIZONA 85718  
 TEL: (520) 298-2888  
 FAX: (520) 298-2888  
 WWW.M3ARCHITECTS.COM



**REVISIONS**

NO.	DESCRIPTION	DATE

Drawn: SOW  
 Checked: RSS  
 Issue Date: 15-MAY-2020  
 ARCHITECTURAL  
 SECOND FLOOR PLAN  
 HANGAR AREA

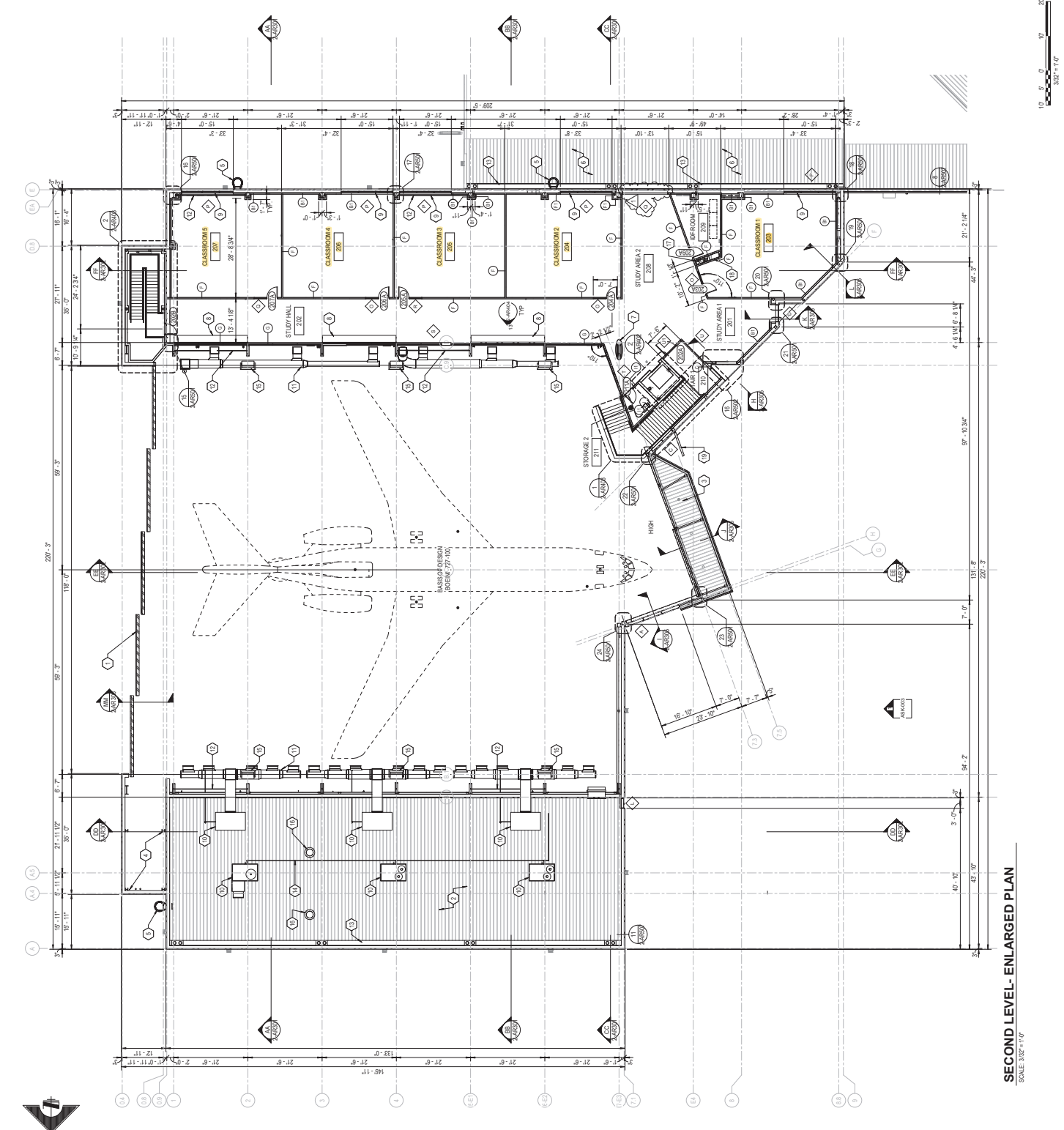
Sheet Number: **2-AR103**  
 MAPN 191411  
 FCC PN 18114

**KEYNOTES**

1. 118'-0" W x 36'-0" H OPENING FOR HANGAR DOOR. HANGAR DOOR TO HAVE (1) REINSTRAND DOOR PER FEIB.
2. HANGAR DOOR TO BE LOCATED BELOW SEEROOF PLAN.
3. METAL SOFT FRAME BELOW.
4. HANGAR DOOR STRUCTURE - PER FEIB.
5. STEEL LADDER AND CAUSE.
6. HANGAR DOOR TO BE METAL ROOF BELOW.
7. STAINLESS STEEL COLUMN WORK.
8. BAR HEIGHT COUNTERTOP.
9. MESH SHAKES ABOVE WINDOW.
10. ADDITIONAL INFORMATION - PER MECHANICAL DRAWINGS FOR ADDITIONAL INFORMATION.
11. DUCTWORK - PER MECHANICAL DRAWINGS.
12. BRACING PER FEIB (PANT).
13. HANGAR DOOR TO BE METAL ROOF BELOW.
14. SPRING PER MECHANICAL.
15. HEATER - PER MECHANICAL DRAWINGS FOR ADDITIONAL INFORMATION.
16. ROOF EXHAUST - PER MECHANICAL.
17. DRAWINGS TO INCLUDE DUCT WORK FROM BELOW - PER MECHANICAL DRAWINGS.
18. OPENING IN FLOOR FOR DATA-COMM CHASE TO FIRST FLOOR LEVEL.
19. BUILDING SIGNAGE.

**GENERAL NOTES**

- A. ALL HANGAR'S CONCRETE STUDS WALLS ARE TO THE FACE OF THE METAL STUD WALL.
- B. SEE SHEET 2-AR01 FOR PARTITION TYPES (---C).
- C. SEE SHEET 2-AR03, 2-AR04 AND 2-AR05 FOR FRAME TYPES (---D).
- D. SEE SHEET 2-AR02 FOR ROOM AND DOOR SCHEDULES.



**SECOND LEVEL - ENLARGED PLAN**  
 SCALE: 3/32" = 1'-0"