



Form CAP-04/18P

ATCO's Copy/AAI Copy^s

(*\$.Mention only one in each of the two copies*)

AIRPORTS AUTHORITY OF INDIA

File No.:

Date:/...../.....

RESULT OF SKILL ASSESSMENT BOARD (ACC-PLR)

Mr/Ms {*name and designation of ATCO*}, Employee number {*Employee number*}, Licence number {*Licence number*} was assessed by the duly constituted skill assessment board on {*date in dd.mm.yyyy format*} in Area Control Centre Planning Rating in {*name of ACC Unit*} unit at {*Name of station*} on successful completion of on-the-job training in accordance with skill requirements mentioned in CAPC {*04 of 2023*}* as follows:

Date of commencement of OJT	Date of Completion of OJT	OJT Required		OJT Performed	
		Months-Days	Hours	Months-Days	Hours

Mr/Ms {*name and designation of ATCO*} has been assessed as successful by the Skill Assessment Board; by demonstrating competency at a level appropriate to the Area Control Centre Planning Rating in {*name of ACC unit*} unit at {*Name of station*}.

Mr/Ms {*name and designation of ATCO*} obtained {*percentage of marks*} in skill assessment.

The pass percentage in skill assessment is 80%.

.....
(Signature of ATS In-charge with seal)

Copy to:

1. Individual File of ACC Planner.

[*: Write number of updated versions of CAPC if any]