

Pilot / Crew Member Declaration

PRIVACY NOTICE: The personal information collected on this form is collected under the authority of subsection 33(c) of Alberta's *Freedom of Information and Protection of Privacy Act* for the purpose of administering the College's drones program and insurance. It may be used and disclosed to external agencies and other College departments and employees for this purpose, or for a use consistent with this purpose. If you have a question about the collection, use, disclosure or protection of the personal information being collected on this form, please contact the College's Manager of Institutional Compliance by phoning (403) 320-3202 ext. 5703, emailing privacy@lethbridgecollege.ca, or writing to 3000 College Dr S, Lethbridge, AB T1K 1L6 c/o Manager of Institutional Compliance.

What this form is for: This form is to be completed by everyone who flies a drone or assists in its operation as a crew member on College business.

Instructions: Complete this form and submit it to Institutional Compliance: compliance@lethbridgecollege.ca.

Retention: This form and attachments are to be securely stored by Institutional Compliance for as long as the person is authorized to fly a drone or assist in its operation.

pilot or crew member		
first name	last name	age
phone number	email address	

Please initial next to each applicable statement and fill in the blanks. By doing so, you declare the statement to be true.

_____ I will only fly a drone that is marked and registered in accordance with Canadian Aviation Regulations, that is owned, leased or rented by the College, and that weighs no more than 25 kilograms.

_____ I will only fly a drone or assist in its operation for research, education or training purposes.

_____ I will only fly a drone or assist in its operation when authorized to do so by my supervisor at the CLC level and, if the drone will be flown inside a College building, by Occupational Health and Safety. Alternatively, I am deemed to be authorized to fly a drone or assist in its operation by the Flying a Drone SOP.

_____ I have read and understand the Flying a Drone SOP. I agree to follow it and all applicable laws, regulations, and College policies. I understand that failing to do so may result in sanctions against me. I understand that it is my responsibility to make myself aware of my responsibilities as a pilot or crew member.

_____ I will advise Institutional Compliance and, if applicable, my supervisor at the CLC level of any changes to the information on this Pilot / Crew Member Declaration or if my drone pilot certificate is suspended, cancelled or allowed to expire.

_____ Whenever I fly a drone or assist in its operation, I will have on my person or immediately available to me all of the documents listed in section 4 of the Flying a Drone SOP which I am required to carry.

_____ I understand that I am personally responsible to pay any fines and penalties incurred by me.

_____ I understand that making a false statement may result in sanctions against me.

Initial one of the following:

_____ I am an employee, and my employee ID is: _____.

_____ I am a student, and my student ID is: _____.

Initial at least one of the following:

_____ I will be flying a drone as a pilot, conducting: ☐ basic operations only ☐ basic and advanced operations.
I have a valid drone pilot certificate. My Drone Pilot Certificate # is _____.

_____ I will be assisting in a drone's operation as a crew member.

Additional declarations for pilots (not applicable to crew members):

_____ I will be flying above the maximum height indicated in subsection 8(i) of the Flying a Drone SOP. *Note: This requires a special flight operations certificate.*

_____ I will be flying within 100 feet (30 metres) of a bystander, measured horizontally and at any altitude. *Note: This requires an advanced drone pilot certificate.*

_____ I will be flying within three nautical miles (5.6 kilometres) of an airport or one nautical mile (1.9 kilometres) of a heliport. *Note: This requires an advanced drone pilot certificate. You must follow the airport or heliport's established procedure.*

_____ I will be flying in controlled airspace. *Note: This requires an advanced drone pilot certificate and authorization from NAV CANADA.*

Signature (not required if emailed from your Lethbridge College account)

Date (YYYY/MM/DD)