# **CHECKLIST FOR MENTAL HEALTH**



**Civil Aviation Directorate** 

Transport Malta- Civil Aviation Directorate, Pantar Road, Lija, LJA 2021, Malta. Tel:+356 2555 5000 ams.tm@transport.gov.mt www.transport.gov.mt

MEDICAL IN CONFIDENCE

Complete this page fully and in	BLOCK	CAPITALS – Refer to in	nstructions for	completion		MEDICAL IN CON	TIDEN	JE.
(1) State of licence issue:			(2) Medical certificate applied for: Class 1 □ Class 2 □ Class 3 □					
(3) Surname:			(4) Previous surname(s):			(12) Application:		
						Revalidation/Renewal □		
(5) Forename(s):			(6) Date of birth(dd/mm/yyyy): (7) Sex:		(13) Reference number:			
(8) Place and country of birth:			Female					
(10) Permanent address:		(11) Postal address (if different):						
Country: Telephone No.: Mobile No.: E-mail:		Country: Telephone No.:						
(14) Licence(s) held (type): Licence number:	(15) Any limitations on licence(s)/medical certificate held No □ Details: Yes □							
(16) Have you ever had a medica	evoked?							
No □ Yes □ Date: Details:		No         □         n/a         □           Yes         □         Date:         Place:           Details:         □         Place:         □						
(18) Do you drink alcohol?		(19) Do you currently use any medication?						
No		No  State medication, dose, date started and why						
(20) Do you smoke tobacco? No No, Stopped		, , ,						
No, Stopped □ State date: Yes □ State type and amount:								
General and medical history: (Please tick). If yes, give details in remarks section (21).								
Following are not satisfactory (review and document):  Yes No Refer to specialist if any of the below: Yes No Any of the below symptoms:  Yes No Following are not satisfactory:								No
Current work and life stressors		Psychotic disorder		Use of alcohol or other psycl	noactive	Appearance		
Coping strategies under periods of psychological stress or pressure in the past, including seeking advice from others  Any difficulties with operational crew		Organic mental disorder		substances		Attitude		
		Psychoactive medication Schizophrenia, schizotypal or delusional		Loss of interest/energy  Eating and weight changes		Behaviour		╁
	<del>                                     </del>	disorder Mood disorder				Mood		╄
resource management (CRM)		Neurotic, stress-related or some	ntaform	Sleeping problems  Low mood and, if present, ar	w suicidal	Speech Thoughts process and content		╁
any difficulties with employer and/or other colleagues and managers		disorder		thoughts		Perception		
Interpersonal and relationship issues, including difficulties with relatives, friends, and work colleagues		Personality or behavioural diso		Anger, agitation or high mod		Cognition		
		Disorders due to alcohol or oth psychoactive substance(s) use of	or misuse	Family history of psychiatric particularly suicide		Insight		
		Deliberate self-harm and suicid	le attempt	Depersonalisation or loss of	control	Judgement		<u> </u>
(21) Comments:								
(22) Referral to Specialist (Tick as appropriate)	1	T	<u> </u>					
Yes No		Name of specialist						
(23) <b>Declaration:</b> I hereby declare that I have carefully considered the statements made above and to the best of my belief they are complete and correct and that I have not withheld any relevant information or made any misleading statements. I understand that, if I have made any false or misleading statements in connection with this application, or fail to release the supporting medical information, the licensing authority may refuse to grant me a medical certificate or may withdraw any medical certificate granted, without prejudice to any other action applicable under national law.  CONSENT TO RELEASE OF MEDICAL INFORMATION: I hereby authorise the release of all information contained in this report and any or all attachments to the AME and, where necessary, to the medical assessor of the licensing authority, recognising that these documents or electronically stored data are to be used for completion of a medical assessment and will become and remain the property of the licensing authority, providing that I or my physician may have access to them according to national law. Medical confidentiality will be respected at all times.								
			·					
Date Signature of appli		ıcant	Signature of AME/(medical assessor)					

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# **Civil Aviation Directorate**

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#### **Data Protection Notice**

All data collected in this form is processed in accordance with the Privacy Laws that include General Data Protection Regulation (EU) 2016/679 and Chapter 586 of the Laws of Malta (Data Protection Act). The data provided may be exchanged with other Public Authorities and/or Government Departments as required and permitted by Maltese Law. Transport Malta of Triq Pantar, Lija, Malta LJA2021 is the data controller for the purpose of the privacy laws. The Privacy Notice attached with this application sets out the way in which personal information/data is collected and processed by Transport Malta, as well as the steps that are taken to protect such information.

#### **Data Protection Privacy Notice**

Transport Malta of Triq Pantar, Lija, Malta LJA2021 is the Data Controller for the purpose of the Data Protection Act CAP. 586 and General Data Protection Regulation (EU) 2016/679 (GDPR). This Privacy Notice sets out the way in which we collect and process your Personal Information, as well as the steps we take to protect such information.

#### 1. The information we collect and how we use it

- 1.1. From this application form Transport Malta collects different types of information which information is that required by Law and is used explicitly for your particular application. It is to be noted that if the required information is not provided the said application cannot be processed.
- 1.2. The primary purpose for collecting information is mainly to process the application for the service being applied for, however, your personal information may also be used for related purposes that amongst other include: sending notifications, renewal of licence/certificate after expiry period, and for the provision of information with regards to any legislative amendments which may affect the services offered to you.

## 2. To whom we disclose information

- 2.1. This information will be solely used for the reasons detailed above. However there may be cases where personal iinformation is shared with the following third parties for reasons listed below:
  - · Any third party offering assistance in providing the required service;
  - Any law enforcement body who may have any reasonable requirement to access your personal information;
  - Third party entities responsible for the data processing contracted by Transport Malta.

## 3. Data Subject Rights

- 3.1. With respect to your privacy rights, Transport Malta is obliged to provide you with reasonable access to the Personal Data that you have provided to us. Your other principal rights under data protection law are:
  - a. the right for information;
  - b. the right to access;
  - c. the right to rectification;
  - d. the right to erasure;
  - e. the right to restrict processing;
  - f. the right to object to processing;
  - g. the right to data portability;
  - h. the right to complain to a supervisory authority; and
  - i. the right to withdraw consent.
- 3.2. If you wish to access or amend any Personal Data we hold about you, or to request that we delete any information about you, you may contact us by sending a request to <a href="mailto:dataprotection.tm@transport.gov.mt">dataprotection.tm@transport.gov.mt</a>. We will acknowledge your request within seventy-two (72) hours and will do our utmost to handle it promptly. We will respond to these requests within a month, with a possibility to extend this period for particularly complex requests in accordance with Applicable Law.
- 3.3. At any time, you may object to the processing of your Personal Data, on legitimate grounds, except if otherwise permitted by applicable law.
- 3.4. In accordance with Applicable Law, we reserve the right to withhold personal data if disclosing it would adversely affect the rights and freedoms of others. Moreover, we reserve the right to charge a fee for complying with such requests if they are deemed manifestly unfounded or excessive.

# 4. Retention period

- 4.1. Personal data will be retained for not more than 3 months from date of application should the application not be submitted complete or is rejected.
- 4.2. Once the service related to your application is provided, we will retain your information for as long as needed to provide you with our service, or to comply with our legal obligations, resolve disputes and enforce our agreements.

# 5. Security

- 5.1. We take appropriate security measures to protect against loss, misuse and unauthorized access, alteration, disclosure, or destruction of your information. Additionally, steps will also be taken to ensure the ongoing confidentiality, integrity, availability, and resilience of systems and services processing personal information, and will restore the availability and access to information in a timely manner in the event of a physical or technical incident. All information gathered is kept confidential and is used solely for the purpose indicated herein.
- 5.2. If we learn of a security systems breach, we will inform you of the occurrence of the breach in accordance with applicable law.

# 6. Governing Law

All data collected in this form is processed in accordance with the Privacy Laws that include General Data Protection Regulation (EU) 2016/679 and Chapter 586 of the Laws of Malta (Data Protection Act).

## 7. Data Protection Officer

7.1. Transport Malta has a Data Protection Officer ("DPO") who is responsible for matters relating to privacy and data protection. The DPO can be reached at the above address or by email: <a href="mailto:dataprotection.tm@transport.gov.mt">dataprotection.tm@transport.gov.mt</a>

# 8. Contacting us

8.1. Please address any questions, comments and requests regarding the application process to civil.aviation@transport.gov.mt