



International
Civil Aviation
Organization

Organisation
de l'aviation civile
internationale

Organización
de Aviación Civil
Internacional

Международная
организация
гражданской
авиации

منظمة الطيران
المدني الدولي

国际民用
航空组织

Ref.: LT 2/6B.96 - SA224

Lima, 08 June 2017

To: Mr. Claude Miquel, Directeur de la sécurité de l'aviation civile, Antilles-Guyane, French Antilles
Mr. Jerome Journet, Regional Director, West Indies and French Guiana
Mr. Jean-Michel Pubellier, Deputy Regional Director, West Indies and French Guiana
Mr. Michel Arenó, Head of French Guiana Air Control Centre Cayenne-Félix Eboué Airport, Head of the Aircraft Search and Rescue RCC
Lt. Col. Egbert Field, Guyana Civil Aviation Authority
Mr. Jerry Miranda, Ministry of Public Works, Suriname

Subject: **Eighth South American Meeting on ATS Routes Network Optimisation (SAM ATSRO/8)**
(Lima, Peru, 21 to 25 August 2017)

Action
required: Take note and design participants. Please confirm participation before **7 August 2017**

Sir,

I have the honour to address you this letter to refer to the strategy to support the optimisation of South American airspace, as well as to the programme of activities adopted by the Nineteenth Meeting of the South American Implementation Group (SAM/IG/19 - May 2017).

In such sense, I am pleased to invite your Administration to participate in the Eighth Meeting on ATS Routes Network Optimisation (SAM ATSRO/8), to be held in this Regional Office, in Lima, Peru, from **21 to 25 August 2017**.

This meeting aims to review Version 04 of SAM Routes Network, in the framework of the study on the optimisation of South American Region ATS route network, which is promoted on the context of compliance with ICAO Assembly Resolution A37-11 and the goals of the Declaration of Bogota.

Moreover, it is important to emphasize that the Meeting will take as a frame of reference for its activities, the draft document on "*PBN Concept of Operations (CONOPS) for SAM Airspace*", approved at SAM/IG/19 meeting.

Experts appointed by their administrations should use the Version 04 Routes Master, in Excel format, which will be uploaded as part of the Meeting's documentation, to identify:

- a) Route optimisations to be implemented;
- b) Benefits in fuel savings on selected routes; and
- c) CO₂ reduction to be achieved using ICAO IFSET tool.

Likewise, should your Administration identify a route that can be optimised to generate important fuel savings, or representing an improvement in operational efficiency, same can also be presented to the Meeting for early implementation.

Participating delegates should be experts, planners and/or Air Traffic Management (ATM) specialists from Civil Aviation Administrations and/or ATS service providers directly involved in the design and optimisation of airspace in SID and STAR RNAV routes within the PBN concept, with the authority to take decisions about airspace optimisation during the Meeting.

The draft Agenda to be dealt with during the Meeting is included as **Attachment A**. **Attachment B** contains additional general information on the event.

Please take into consideration that States who wish to attend this meeting can make use of the following financing alternatives:

- a) Fellowships from a national ICAO Technical Cooperation Project approved by your State;
- b) Fellowships sponsored by Regional Project RLA/06/901, having **one (1)** fellowship for each State participating in this Project, that does not count on the previous alternative, and having the interested administration to provide the air tickets to and from the host country; or
- c) Own resources of your Administration, in the lack of any of the previous alternatives.

For participants who require a fellowship, the *ICAO Fellowship Nomination Form* is attached (**Attachment C**) and must be completed and submitted to this Office as soon as possible, in any case, no later than **7 August 2017**.

Please be aware that the meeting will be conducted in Spanish, with English simultaneous interpretation service **only** if confirmations of English speaking States participants are received in this Regional Office no later than **3 August 2017**.

The corresponding documentation will be published in the ICAO SAM Office website:

http://www2010.icao.int/SAM/Pages/ES/MeetingsDocumentation_ES.aspx?m=2017-ATSRO8.

No documentation is foreseen for distribution during the development of the meeting.

According to the aforesaid, I am please to invite your Administration to nominate expert(s) to attend this meeting, by submitting, if applicable, the attached registration form (**Attachment D**), duly filled out for each participant, by e-mail (icaosam@icao.int) no later than **7 August 2017**.

Messrs. Fernando Hermoza (fhermoza@icao.int), ATM/SAR Regional Officer and Roberto Sosa (rsosa@icao.int), ANS & SFTY Regional Office of the ICAO South American Regional Office, are at your disposal should you require any additional information on this meeting.

Accept, Sir/Madam, the assurances of my highest consideration.



Franklin Hoyer
Regional Director
ICAO South American Office
Lima

Enclosure

As indicated

cc: Dr. Joyce Blokland-Wijnstein, Permanent Secretary, Directorate of Transport and Communication, Suriname
Mr. Faizel Baarn, Head of Civil Aviation Department, Suriname
Mr. Brian De Souza, Director, CASAS, Suriname
Mr. Marcus Doller, Air Safety Support Intl. (ASSI), United Kingdom
Mr. Bruce D'Ancey, Policy Specialist, Flight Ops, Air Safety Support International (ASSI), United Kingdom

ATTACHMENT A

**EIGHTH SOUTH AMERICAN MEETING ON
ATS ROUTES NETWORK OPTIMISATION
(ATSRO/8)**

(Lima, Peru, 21 to 24 August 2017)

DRAFT AGENDA

- Agenda Item 1: Review of the South American Region ATS Routes Network Optimisation Programme
- Agenda Item 2: PBN implementation control and CCO/CDO concepts
- Agenda Item 3: Analysis of Version 04 of the SAM ATS routes network and SAM-CAR inter-regional ATS routes
- Agenda Item 4: Other business

EXPLANATORY NOTES

Agenda Item 1: Review of the South American Region ATS Routes Network Optimisation Programme

Under this Agenda Item, the Meeting will have the opportunity to review the South American Region ATS routes network optimisation programme. The programme is aimed at the routes network re-structuring, and the broad implementation of RNAV-5 navigation specification, or even more advantageous ones (RNAV-2 or RNAV-4), seeking the most efficient integration among ATS regional routes, control sectors, entry and exit points of the main TMA by applying the Flexible Use of Airspace concept and PBN design techniques.

Draft document on “*PBN Concept of Operations (CONOPS) for SAM Airspace*”, approved at SAM/IG/19 meeting, will be taken as a frame of reference for these activities.

Agenda Item 2: PBN implementation control and CCO/CDO concepts

During SAM/IG/19 meeting, States were provided with a new Excel Table for PBN procedures implementation control, including runway type (NPA, PA, NINST) existing in each of the ANP’s international airports.

This Table, consolidated by each State, will be presented to the Meeting with the purpose of reflecting the progress of PBN implementation plans in line with the objectives of the Declaration of Bogota regarding the implementation of departure/arrival (SID/STAR) RNAV routes and the application of CCO/CDO concepts. It is expected that the result of the set of Tables will provide the Meeting with additional elements for an adequate analysis of Version 04 of Routes Network.

Agenda Item 3: Analysis of Version 04 of the SAM ATS routes network and SAM-CAR inter-regional ATS routes

The Meeting will conduct activities for the implementation of Version 04 of Routes Network which was developed with the support of RLA/06/901 Regional Project, in the area of SAM regional routes, including a list of proposals for inter-regional (SAM-CAR) RNAV routes.

In this sense, proposals for routes which optimization will generate significant operational advantages and favor inter-regional harmonization will be selected, leading to the formulation of implementation schedules.

Those States having completed the validation phase in TMA airspaces of their PBN implementation programme, will provide the Meeting with entry and exit points for the interface with the ATS routes network.

Agenda Item 3: Other business

Under this Item, the Meeting will have the opportunity to review related subjects not discussed in the above indicated items.

TENTATIVE WORK PROGRAMME

Hour	Monday 21 August 2017	Hour	Tuesday 22 August 2017	Wednesday 23 August 2017	Thursday 24 August 2017	Hour	Friday 25 August 2017
08:30 09:00	- Registration of participants	08:30 10:30	- Review of Agenda Item 3 - Review of Agenda Item 4	- <i>Ad-hoc</i> groups	Review of the work carried out by <i>Ad-hoc</i> groups	09:00 09:45	Review of report
09:00 09:15	- Opening of the event - Election of President and Vice-President						
09:15 09:30	<i>Coffee break</i>	10:30 10:45	<i>Coffee break</i>	<i>Coffee break</i>	<i>Coffee break</i>	09:45 10:00	<i>Coffee break</i>
09:30 12:30	- Review of Agenda Item 1 - Regional planning presentation	10:45 12:15	- <i>Ad-hoc</i> groups	- <i>Ad-hoc</i> groups	Review of work carried out by <i>Ad-hoc</i> groups	10:00 11:30	Report approval
12:30 13:30	<i>Lunch</i>	12:15 13:15	<i>Lunch</i>	<i>Lunch</i>	<i>Lunch</i>	11:30 12:00	Closing of the event
13:30 15:30	- Review of Agenda Item 2	13:15 15:30	- <i>Ad-hoc</i> groups	- <i>Ad-hoc</i> groups	Review of work carried out by <i>Ad-hoc</i> groups		

ATTACHMENT B



International Civil Aviation Organization
South American Regional Office
**Eighth South American Meeting on ATS Routes
Network Optimisation (SAM ATSRO/8)**
(Lima, Peru, 21 - 25 August 2017)

SAM ATSRO/8-IP/01
07/06/17

GENERAL INFORMATION

(Presented by the Secretariat)

1. Site and dates

The Eighth South American Meeting on ATS Routes Network Optimisation (SAM ATSRO/8) will be held in the ICAO South American (SAM) Regional Office's premises in Lima, Peru, from 21 to 25 August 2017. Since we count with two conference rooms, it will be appreciated that upon arriving in the Office, you verify where the event will take place (floor 3 or 4).

2. Coordinators

Mr. Fernando Hermoza H.
SAM ATM/SAR Regional Officer
Tel.: +511 611 8686, Ext. 106
E-mail: icaosam@icao.int; fermoza@icao.int

Sr. Roberto Sosa E.
ANS & SFTY Regional Officer
Tel.: +511 611 8686, Ext. 104
E-mail: icaosam@icao.int; rsosa@icao.int

3. Participants registration

Participants should register on Monday, 21 August 2017, from 08:30 to 09:00 hours, at the meeting's site.

4. General information

Can be found in the "General Information", "List of Hotels" and "Weather" sections in the ICAO SAM Regional Office website: http://www2010.icao.int/SAM/Pages/ES/default_ES.aspx (left panel, under South American (SAM) Office).

5. Documentation

The documentation will be posted on the ICAO SAM Regional Office website: http://www2010.icao.int/SAM/Pages/ES/MeetingsDocumentation_ES.aspx?m=2017-ATSRO8.

Participants should check our website frequently to download the documentation. All participants must bring their own set of documentation (hard copy or electronically in a laptop) to the meeting venue; there will be no hard copies available for distribution.



APPENDIX C

**INTERNATIONAL CIVIL AVIATION ORGANIZATION
FELLOWSHIP NOMINATION FORM**

NOTE: This form should be completed and signed by all parties concerned and forwarded to the appropriate ICAO office under cover of an official Government request at least three months prior to the starting date of the proposed training programme.

PART I – NOMINATION BY GOVERNMENT

The Government of *Enter name of Government* hereby:

1. Nominates: *Enter full name as it appears on nominee's passport* for an ICAO fellowship in the field of *Enter field* (please identify main Field of Training in accordance with the ICAO Course Numbers).
2. Requests the following programme of training under this fellowship:

(List in chronological sequence the various stages of training or study envisaged and, if necessary, identify the level as *ab initio*, advanced, refresher, further specialization, familiarization tour, on-the-job training (OJT), etc.

Host Country(ies)	Training Institute(s) (firms/organizations)	Specific Courses	Period		Duration (weeks)
			from	to	

Total duration

3. Requests that this fellowship be financed under the technical co-operation programme:

Project No.: *Enter Project No.*

Post No.: *Enter Post No.*

**INTERNATIONAL CIVIL AVIATION ORGANIZATION
FELLOWSHIP NOMINATION FORM**

4. Declares that the objectives of this fellowship are:

List objectives of fellowship

5. Agrees that it will assume responsibility for the nominee’s transportation costs (airfare) to and from host country(ies).
 Requests that the nominee’s transportation costs (airfare) to and from host country(ies) be provided by the Project.

6. Certifies that:

- a) the nominee is obligated to return to his/her country, on completion of the fellowship programme, for duty assignment in civil aviation for a minimum period of *Select period of time*.
- b) the nominee’s employment status, rights, salary and seniority will not be adversely affected, during the period of his/her absence, under the fellowship.
- c) all sections of this Nomination Form have been duly completed and the Nominee is suitable for the proposed Training Programme.
- d) nominee is/will be in possession of a valid passport and necessary visas which do not expire before the termination date of the Fellowship.

Date: Enter Date

Signature of Civil Aviation Authority

Name: _____

Title: _____

OBSERVATIONS BY ICAO PROJECT MANAGER/MISSION CHIEF

I certify that all sections of this Nomination Form have been duly completed and the Nominee is suitable for the proposed Training Programme.

Date: Enter Date

Signature

**INTERNATIONAL CIVIL AVIATION ORGANIZATION
FELLOWSHIP NOMINATION FORM**

PART II – NOMINEE’S PERSONAL HISTORY

PART II – NOMINEE’S PERSONAL HISTORY					
1. Name:		2. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female			
3. Date of Birth: (Day/Month/Year)					
4. Private address/city of residence:					
5. Nationality:					
6. Language Ability:					
a) Mother tongue: Enter language of mother tongue					
b) Language(s) used in Primary and Secondary School: Enter language of education					
c) Other language(s) of which nominee has a working knowledge: Enter other language					
d) Language(s) to be used in proposed fellowship programme: Enter language of programme					
7. School Education Record:					
Name/Town/Country of School(s)		Period		Grade completed and certificate acquired	
		from	to		
8. College/University Education Record:					
(If you have graduated with a diploma or degree, indicate under “subject(s) studied” only the major subject(s) studied. Otherwise, indicated all the subjects studied.)					
Name of College/University	Subject(s) Studied	Period		Degree/Diploma Acquired	
		from	to		
9. Technical and/or Specialized Training Record:					
(Same as for 8. above. List and identify any previous ICAO fellowship training.)					
Name and Place of Training Institute	Subject(s) Studied	Period		Duration (weeks)	Diploma/Cert. Acquired
		from	to		

**INTERNATIONAL CIVIL AVIATION ORGANIZATION
FELLOWSHIP NOMINATION FORM**

10. Employment Record
(indicate last five years and/or last two positions)

Employer (name of firm/org.)	Position Last Held	Period		Duties and Responsibilities
		From	to	

11. Nominee's statement:

- (i) I understand that the ICAO fellowship will not become effective and no travel can be undertaken until I receive written notification and instructions of the award from ICAO.
- (ii) Should I be awarded this fellowship, I hereby undertake to:
 - a) Conduct myself, at all times, in a manner compatible with my status as holder of an ICAO fellowship;
 - b) Devote all my time during the fellowship programme to the successful pursuit of my studies as directed by ICAO and by the designated institution in the country of study;
 - c) Refrain from engaging in political, commercial, or any activities detrimental to the host country;
 - d) Submit reports as required by ICAO and comply with all ICAO instructions; and,
 - e) Return to my country, on termination of my fellowship programme, and apply my newly acquired knowledge to further the development of civil aviation in my country.

I certify to the best of my knowledge that all the information given above is true in all respects.

Date: Enter Date

Nominee's Signature

**INTERNATIONAL CIVIL AVIATION ORGANIZATION
FELLOWSHIP NOMINATION FORM**

PART III – LANGUAGE TEST RESULTS

NOTE:	This test is only required if the language to be used during the proposed training is not the mother tongue of the nominee or is not the language used in primary, secondary or college level schools where the nominee acquired his/her education (see PART II – items 6, 7 and 8). The test should be conducted at a language school, university or local Embassy/Council.
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Name of institution conducting the examination:	
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Nominee’s name:	
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Language for which test was set:	
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1. Understanding (check as appropriate):
- a) Understands without difficulty when addressed at normal speed.
 - b) Understands nearly everything at normal speed although occasional repetition may be necessary.
 - c) Understands almost everything if addressed slowly and carefully.
 - d) Requires frequent repetition and/or translation of words and phrases.
 - e) Does not understand even the simplest conversation.

2. Speaking (check as appropriate):
- a) Speaks fluently, accurately and is easily intelligible.
 - b) Occasionally makes errors which do not, however, obscure meaning.
 - c) Makes frequent errors which occasionally obscure meaning.
 - d) Speaks with so much difficulty that comprehension is difficult.
 - e) Errors in speech so severe as to make comprehension virtually impossible

3. Reading (check as appropriate):
- a) Reads fluently with full comprehension.
 - b) Reads slowly but understands almost everything he/she reads.
 - c) Reads with difficulty; often consults the dictionary.
 - d) Cannot understand what he/she reads.

4. Writing (check as appropriate):
- a) Writes with ease and accuracy.
 - b) Writes with few mistakes; can be understood.
 - c) Writes with difficulty and makes frequent mistakes.
 - d) Cannot write.

CONCLUDING REMARKS

Would this person be able to follow a technical course in this language? Yes No

Date: Enter Date Signature of examiner: _____

Name (type or print): _____

AFFIX OFFICIAL SEAL OR STAMP

**INTERNATIONAL CIVIL AVIATION ORGANIZATION
FELLOWSHIP NOMINATION FORM**

PART IV – MEDICAL REPORT

NOTES:

- 1) It is essential that the nominee be healthy and free of any sickness which may require further examination and/or treatment during the tenure of the Fellowship. The Fellow and/or his/her Government will be responsible to pay for any medical expenses incurred by the Fellow for sickness existing prior to the starting date of Fellowship.
- 2) The nominee must undergo a medical examination conducted by a registered medical practitioner. Medical papers (examination, laboratory or x-ray results, etc.) should not be forwarded unless requested.
- 3) Flight crew members and Air Traffic Controllers who are to undergo training to obtain or renew a license must provide a copy of their medical certification in lieu of this medical report.

The undersigned, Dr. *Enter name of Dr. having completed the medical examination of nominee* *Enter name of Dr. whose photograph appears above,* certifies the following:

The Nominee:

	Yes	No
1) is physically able to travel abroad:	<input type="checkbox"/>	<input type="checkbox"/>
2) is mentally and physically able to carry out intensive:	<input type="checkbox"/>	<input type="checkbox"/>
3) is free from infectious diseases:	<input type="checkbox"/>	<input type="checkbox"/>
4) has good hearing:	<input type="checkbox"/>	<input type="checkbox"/>
5) has good eyesight:	<input type="checkbox"/>	<input type="checkbox"/>
6) is free from ailments that require treatment or periodic medical examination during the proposed duration of the fellowship programme:	<input type="checkbox"/>	<input type="checkbox"/>

Additional comments by Medical Practitioner:

Date: *Enter Date*

Signature of Medical Practitioner

AFFIX OFFICIAL SEAL OR STAMP
(to be affixed across photograph also)



ADJUNTO D / ATTACHMENT D

ORGANIZACIÓN DE AVIACIÓN CIVIL INTERNACIONAL
INTERNATIONAL CIVIL AVIATION ORGANIZATION

OCTAVA REUNIÓN PARA LA OPTIMIZACIÓN DE LA RED DE RUTAS ATS
DE LA REGIÓN SUDAMERICANA (SAM ATSRO/8)

EIGHTH MEETING ON SOUTH AMERICAN REGION ATS ROUTES
NETWORK OPTIMISATION (SAM/ATSRO/8)

Lima, Perú, 21 al 25 de agosto de 2017 / Lima, Peru, 21 to 25 August 2017

FORMULARIO DE REGISTRO / REGISTRATION FORM

1. Estado/*State*:
Organismo/*Organization*: _____

2. Nombre/*Name*: _____

3. Cargo/*Position*: _____

4. Participa como / *Participates as*:

Miembro/*Member* Alternativo/*Deputy* Delegado/*Delegate* Observador/*Observer* / Ponente/*Lecturer* Instructor/*Instructor* Alumno/*Student*

5. Dirección oficial /
Business address: _____

6. Tel.: _____ E-mail: _____

7. Hotel o dirección en
la ciudad/ *Hotel or*
local address: _____

8. Información de vuelo/*Flight information*: Vuelo llegada/ fecha/ hora/
Arrival flight/ date/ hour: _____

Vuelo salida/ fecha/ hora/
Departure flight/ date/ hour: _____

Firma/*Signature*: _____ Fecha/*Date*: _____