



FLIGHT TRAINING SCHOLARSHIP APPLICATION

Name: _____ **Birth-date:** _____ **Gender:** _____

Mailing Address: _____

City: _____ **State:** _____ **Zip code:** _____

Home Phone: _____ **Education level Completed:** _____

Cell Phone: _____ **Email:** _____

Future Plans (i.e. what will you do after high school):

Provide a brief statement about your interest and goals in seeking a private pilot's license (attach separate sheet if needed):

Applicants Signature: _____ **Date:** _____

Parent Signature _____ **Date:** _____
(Attach any documents you think relevant to our evaluation of the application)