



**ORCAS AVIATION ASSOCIATION
SCHOLARSHIP APPLICATION**
POB 712 Eastsound, WA 98245

Name: _____ **Birthday:** _____ **Gender :** _____

Address: _____

Phone: _____ **Email:** _____

Occupation/Work Experience: _____

Future Plans for aviation: _____

Provide a brief statement about your interest and goals in seeking a Private Pilot's License (attach separate sheet if needed):

Signature: _____ **Date:** _____

Submit to: Allan Tone – 360.776.9505 - Allan@orcasaviationassn.org