FLYING FUULZ - EAA UNAPTER 1489 Flight Training Scholarship Application

First Name:		Last Name:	
Address: Ph		Phone:	
City:		State: Zip Code:	
Birth Date:	Age:	E-mail Address:	

- Applicants must be between the ages of 16 and 22 as of December 31st of application year.
- Applications are due December 1st.
- Scholarship(s) will be awarded at January Chapter Fly-in of the following year.
- The scholarship funds will be available for 3 years calendar years to the recipient.
- Scholarship recipients must become and remain a paid member in good standing of the Flying FOOLZ EAA Chapter 1489 to continue in the scholarship program. Scholarship funds will not be distributed to flight schools on behalf of non-members.
- Scholarship recipients are expected to attend and assist with Chapter events.

The Scholarship includes \$1,000 to be distributed in three parts as follows:

- 1. \$300 toward flight instruction on selection. *Payment made to instructor or school when proof of training has been submitted.*
- 2. \$400 when student has soloed. *Payment made to instructor or school when log book entry or certification by instructor has been submitted*
- 3. \$300 when student has passed FAA pilot written exam. *Payment made to instructor or school when copy of certificate has been submitted.*

Scholarship applicants will answer the questions below and send all documents and completed form to the address below postmarked no later than December 1.

- 1. Send two (2) letters of recommendation.
 - a. One letter from teacher or employer
 - b. One from the flight school the applicant has chosen.
- 2. Send copy of most recent report card or proof of graduation/completion from high school/college.

3522 SW 52nd Avenue, Bushnell, FL 33513

Phone: (352) 235-9598 E-mail: foolzinfo@flyingfoolz.org

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In a few sentences each, please answer the following questions (print or type).

1.	1. What have you done with respect to aviation (membership in aviation clubs, Young Eagles flights, Civil Air Patrol, ROTC, working at or with airplanes)?			
2.	What are your aviation goals/objectives?			
3.	What are your other extra-curricular activities?			
4.	What are your career goals?			
Applica	nnt Signature:	Date:		
<u>If appli</u>	cant is under the age of 18 years of age, the information	n below must be completed.		
	/Guardian Signature:			
	/Guardian (Print First & Last Name)			
Parent,	/Guardian Address (if different from applicant):			
Parent,	/Guardian Phone Number:			

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