

<b>EAA Chapter 225 Assisted Flight Training Scholarship – Application</b>			
<p><b>*1. Form Instructions:</b> Please find help filling out Application on Page 3.</p>	<p><b>*2. Type of Application</b></p> <p><input type="checkbox"/> New</p> <p><input type="checkbox"/> Change/Revision</p>	<p><b>*a. If a Change, state section(s) that is/are being Changed:</b></p>	<p><b>*b. If a Revision, state section(s) that is/are being Revised:</b></p>
<p><b>3. Date of Application:</b> _____</p>		<p><b>*4. EAA Number (If a member):</b> _____</p>	
<p><b>*5a. Affiliation to any Aviation Organizations:</b> _____</p>		<p><b>*5b. Recommended by:</b> _____</p>	
<b>*6. APPLICANT INFORMATION (please print):</b>			
<p><b>*a. Name (First, Middle, Last):</b> _____</p>			<p><b>*b. Date of Birth</b> _____</p>
<p><b>*b. Residential Address (Street, City, State, Zip):</b> _____</p>		<p><b>*c. Mailing Address (if different):</b> _____</p>	
<p><b>*d. Home Phone:</b> (     ) _____</p>		<p><b>*e. Cell Phone:</b> (     ) _____</p>	
<p><b>*f. Email:</b> _____</p>			
<b>*7. Education – Primary &amp; Secondary</b>			
<p><b>*a. Primary</b></p> <p>High School: _____ From Month/Year _____ To Month/Year _____</p> <p>City, State: _____</p> <p>Scholastic Honors and/or Awards: _____</p>			
<p><b>*b. Secondary</b></p> <p>College: _____ From Month/Year _____ To Month/Year _____</p> <p>City, State: _____</p> <p>College: _____ From Month/Year _____ To Month/Year _____</p> <p>City, State: _____</p> <p>Date of Graduation: _____ Scholastic Honors and/or Awards: _____</p>			

<b>*8. Name &amp; Contact Information of Parent or Guardian (if applicant under age 18), for application matters.</b>	
Name (First, MI, Last): _____	
Residential Address: _____	
Mailing Address (if different): _____	
Home Phone: (    ) _____ Cell Phone (    ) _____	
FAX: (    ) _____ Email Address: _____	
<b>Summary – Applicant Work Experience</b>	
<b>*9. List present and past employment and volunteer work experience beginning with your most recent job or task.</b>	
Name of Business/Organization and Address: _____ _____, Job Title or Task _____	
*a. Start Date: _____	*b. End Date: _____
Name of Business/Organization and Address: _____ _____, Job Title or Task _____	
*a. Start Date: _____	*b. End Date: _____
Name of Business/Organization and Address: _____ _____, Job Title or Task _____	
*a. Start Date: _____	*b. End Date: _____
<b>*10. Essay:</b> (Required) In 500 words or less, describe why you deserve to receive this \$1000 Flight Training Scholarship Award. Please include Essay and any other documentation to this application on separate sheets.	
<b>*11.</b> By signing this application, I certify that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to removal from this Scholarship.	
Signature of Applicant (or Parent or Guardian, if Applicant under 18): _____	
<b>(All Data below is for EAA Chapter 225 Scholarship Committee Use Only)</b>	
<b>Review of Application</b>	
*Scholarship Committee Member Name: _____	
*Scholarship Committee Member Name: _____	
*Scholarship Committee Member Name: _____	
*Scholarship Committee Member Name: _____	
*Name of Approved Flight School: _____	
*Name of Airport: _____	Airport Location: _____
*Flight Instructor (Name) Comments: _____	
*Approved By:(Print Name) _____	
*Approved by Signature: _____	*Date Approved: _____

**Instructions for filling out the EAA Chapter 225 Assisted Flight Training Scholarship Award Application**

**Summary:** This is a standard form. With exception of the required signature at the end of the application, all input will be printed legibly. All of the numbered items beginning with number 2 are to be filled in, at the discretion of the applicant. Required items are identified with an asterisk on the form and specified in the item descriptions below. If you have more information that you wish to add to any particular section, please do so on a separate continuation sheet and attach to this form. Any mention of EAA Chapter 225 or Scholarship Committee in the application may reference EAA Chapter 225 and/or the Scholarship Committee. If you have any questions regarding any item information request, please contact the EAA Chapter 225 Scholarship Committee at: (603) 781-6572.

**Mail Completed Application to: EAA Chapter 225; Attn: Aviation Scholarship Committee; 21 Deer Ridge Drive; Barrington, NH 03825**

1. **Information:** Reference to this page for help in filling in these forms.
2. **Type of Application:** (Required): Select one type of application in accordance with EAA Chapter 225 instructions. New – An application that is being submitted to EAA Chapter 225 for the first time. Change/Revision – Any additional or added information that was not filed with the first application. Note that there will be no extensions to the time limit for submitting applications, unless so directed in written form by EAA Chapter 225.
3. **Date of Application:** Leave this field blank, as the Scholarship Committee will fill it in.
4. **EAA Number:** (Required, if Applicable): Record your EAA Membership Number, if you are a current member of EAA National.
5. **Recommendation:** (Required, if Applicable):
6. **Applicant Information:** (Required): a. Legal Name – Enter full name of applicant, middle initial allowed. b. Residential Address – Enter Street Address, City, State and Zip Code. c. Mailing Address – Please enter Mailing Address if different from residence. d. Home Phone – Enter Area Code then Home Phone Number. e. Cell Phone – Enter Area Code with Mobile Phone Number. f. Email Address – Enter Primary Email Address.
7. **Education:** (Required) a. Primary – Name of High School(s) with Address, City, State; with Start and End Dates; include Date of Graduation, and all Scholastic Honors and Awards. Include any other special accolades including clubs, organizations, and office(s) held. b. Secondary – Name of Colleges and/or Universities attended with Address, City, and State; with Start and End Dates; include Date of Graduation.
8. **Contact Information of Parent or Guardian:** (Required, if Applicant under 18 years of age): Enter Full Name, Residential and/or Mailing Address, Contact Phone Number, FAX Number, and Email Address.
9. **Summary – Work Experience:** (Required): Use Past and Present employment and volunteer work experience beginning with your most recent job or task. Enter Name and Address of Employer or Place of Volunteer along with Start and End Dates; and Job Title or Task Performed.
10. **Essay – Write an essay explaining why you deserve to win this scholarship:** (Required): In 500 words or less, describe why you deserve to receive this \$1000 Flight Training Scholarship Award. Please include Essay and any other documentation to this application on separate sheets.
11. **Disclosure Statement & Signature:** (Required): Statement that Applicant agrees that all information given on Application is true without false or fraudulent statements. An 'Agree To' box needs to be checked, and the Applicant is required to sign the Application.

**Eligibility & Award Requirements:**

1. **Scholarship is open to any individual (male or female) between 15 to 25 years old.**
2. **The Scholarship is valued at \$1000, to be awarded in (2) \$500 increments. First \$500 will be awarded after a minimum of \$1000 of Student Pilot's own funds have been used. The second \$500 will be awarded after second \$1000 of Student Pilot's own funds have been spent.**
3. **If applicant has already spent \$2000 towards Flight Training and has been awarded the Scholarship, the \$1000 can be awarded as a single/full amount, if authorized by the Scholarship Committee.**
4. **The Scholarship is intended to be used for Primary Flight Training ONLY and cannot be used for secondary or additional ratings.**
5. **The Scholarship shall be used for either Sport Pilot or Private Pilot Training ONLY.**

**Scholarship Timeline**

Activity	Begin Date	Deadline
Program Development	Summer	Late Fall
Fund-Raising	Summer & Fall	Spring
Advertising	January	March 31
Application Period	January through March	March 31
Award Announcement	Month of May	May 31

**Continuation Sheet for Additional Information: (This page may be copied for more information as needed):**