

Judith Resnik Memorial Scholarship

APPLICATION

1. Personal Information:

Full Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ (Home) U.S. Citizen? * _____

_____ (Work) **please initial if you answered yes*

_____ (Cell)

Email _____

Employer _____ Date of Hire _____

Occupation _____

Flight School(s) attended _____

Pilot Certificates & Ratings Held	Date Obtained mm/dd/yy
Student Pilot (first solo)	
Recreational Pilot	
Sport Pilot	
Private Pilot SE	
Instrument	
Other	
Commercial Pilot SE	
Multiengine	
Other:	

Pilot Certificates & Ratings Held	Date Obtained mm/dd/yy
ATP Multiengine	
Other:	
Other:	
Flight Instructor	
Multiengine	
Instrument	
Other:	
Other:	
Other:	

Flight Experience by Aircraft Category & Class	PIC hrs	SIC hrs	Dual Given as Instructor
SE Piston			
ME Piston			
SE Turboprop			
ME Turboprop			
SE Turbojet			
ME Turbojet			
Other:			
Other:			
Other:			
TOTAL			

	Total	Instruction Received	Solo	Pilot in Command (PIC)		Cross Country Instruction Received	Cross Country Solo	Cross Country PIC		Instrument	Night Instruction Received	Night Takeoff/Landings	Night PIC		Night Takeoff/Landings PIC
				PIC	SIC			PIC	SIC				PIC	SIC	
Airplanes				PIC				PIC					PIC		PIC
				SIC				SIC					SIC		SIC
Rotorcraft				PIC				PIC					PIC		PIC
				SIC				SIC					SIC		SIC
Powered Lift				PIC				PIC					PIC		PIC
				SIC				SIC					SIC		SIC
Gliders															
Lighter Than Air															
Simulator															
Training Device															
PCATD															

Date and type of flight review, competency or proficiency check, or equivalent: _____

Completion date/ score of written test for certificate/rating sought: _____

2. Personal Achievements:

A. List school, community and/or business associations in which you are currently or were previously active. (Place a check mark next to the ones in which you are currently active.)

B. List important awards, recognitions or scholarships you have received.

Award Presented by Date

C. Scholastic Record – List the highest level of education you have achieved.

School/Location Program/Degree/GPA Graduation Date

D. Provide a single page outline of your goals and career plans.

E. Write a 300-word essay describing your interest in aviation.

3. Recommendations:

Provide three letters of recommendations. At least one must be from someone involved in aviation. The letters can be submitted with your application or the writers may send their letters directly to the committee at the address listed below. Please have the writers provide a phone number or email address by which they can be contacted. Please have the writers state their relationship to the applicant.

Applicant’s signature: _____ Date: _____

Please send application to:

American Flyers
Sherry Magno
32535 Wolf Branch Ln.
Sorrento, FL 32776

Email: Sherry.Magno@americanflyers.com

CHECKLIST OF ITEMS TO INCLUDE WHEN APPLYING

- APPLICATION

- GOAL OUTLINE

- 300 WORD ESSAY

- 3 SIGNED, RECOMMENDATION LETTERS MAILED DIRECTLY TO ADDRESS ON APPLICATION

- "OFFICIAL" COLLEGE TRANSCRIPT SHOWING GPA

- COPY OF 2ND CLASS MEDICAL CERTIFICATE OR HIGHER

- PHOTOCOPY OF LICENSES AND RATINGS

- SPIN ENDORSEMENT