

AMERICAN FLYERS SCOTTSDALE INTERNATIONAL ENROLLMENT FORM

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| Name: (First) | (Middle) | (Last) |
| International Address (REQUIRED): | | |
| US Address (IF UNKNOWN, PLEASE LIST SCHOOL ADDRESS): | | |
| Telephone: | Emergency Name: Telephone: | Email: |
| I will be enrolling in the following course(s): (CHECK ALL THAT APPLY) | | |
| Private Pilot Airplane | Instrument Rating Airplane | Commercial Pilot Airplane |
| Career Course (Private, Instrument, Commercial) | Certified Flight Instructor | |
| I require student housing: Yes No | | |
| I plan to arrive in the US on: (Month/Day/Year) | Local Time (HH:mm): | I plan to depart the US on: (Month/Day/Year) |
| I plan on starting the training program on: (Month/Day/Year) | | Local Time (HH:mm): |
| I plan to completing the training program on: (Month/Day/Year) | | |
| I understand it is mandatory to be covered by health insurance for the duration of my stay in the United States | | |
| I am already covered by a policy that will apply in the US and will supply a copy | | |
| I will arrange insurance through the school on arrival | | Please send details of insurance |
| FOR THOSE REQUIRING A STUDENT VISA | | |
| Date of Birth (Month/Day/Year): | City and Country of Birth: | |
| Citizenship: | Permanent Resident of: | |
| Occupation: | | |
| Pilot Ratings held, if any: | | |
| Briefly describe why you wish to become a pilot: | | |
| NOTE: A TUITION DEPOSIT AND A COPY OF A VALID PASSPORT IS REQUIRED BEFORE THE I-20 CAN BE PROCESSED | | |
| Signature of Applicant: | Signature of Parent or Guardian <small>(required if applicant is under 18)</small> | |
| Payments can be made by wire transfer, travelers checks, personal of company checks (drawn on US banks) Please use all of the following information for wire transfer of funds: Bank of America Bank Address: 100 West 33rd Street, New York, NY 10001 Account Name: American Flyers, Inc. Domestic Wire: Account number - 004810799031 / Routing number - 0260-0959-3 International Wire: Account number - 004810799031 / Swift number - BOFAUS3N / Chips Address: 0959 In order to assure credit to the proper account please indicate on deposit the <i>full name of the STUDENT that will be training</i> | | |
| PLEASE RETURN THIS FORM VIA EMAIL OR POSTAL MAIL TO: American Flyers (Admissions) 15115 Airport Drive, Suite 1A Scottsdale, AZ 85260 USA Telephone: 408-939-3997 Email: sdl@americanflyers.com (please use link above) | | |
| NOTE: M-1 VISA STUDENTS – TUITION DEPOSITS WILL BE REFUNDED IN FULL LESS A \$360 FEE UPON RETURN OF THE UNUSED I-20 FORM | | |