

		CONTACT INFORM	MATION	
□ Mr. □ Ms. □	I Mrs. □ Miss			
Full Legal Name				
Preferred name _				
Date of Birth		Current Age		
Permanent address	SS			
			Zip Code	
Mailing address (	if different from permanent ad	dress)		
City		State	Zip Code	
Email Address				
Alternate Contact	t Number		☐ Mobile ☐ Landline	
	18 years of age con			
Parent/Guardian	Address (if different from	applicant)		
City	State	Zip Code	Contact Number	
I/We the parent(s of the criteria and minor child to ap	l intentions associated ply in the scholarshi	tan(s) of our minor child, ed with this scholarship approcess. I/We also und	understand all oplication and hereby give our consent for our erstand that The Lyons Aviation Foundation will ald the applicant be successfully awarded this	
Name		Signature	Date	
Name		Signature	Date	
Witness		Signature	Date	

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Schooling and Involvement							
nrolled in school?	□Yes □No						
in school, name o	f school or college	e: (Include full address, City, State	, Zip and Website)				
ool completed. (Se	lected current or h	nighest completed of Hi	gh School or College)				
$\Box$ 10 <sup>th</sup> $\Box$ 11 <sup>th</sup>	□ 12 <sup>th</sup>						
an 🗆 Sophomore	: □ Junior □	Senior   Graduate S	chool				
Based upon	what scale	Expected Gradua	ation Date				
e major?							
gh school or colleg	e transcripts: $\square A$	attached □ Being mail	ed in				
not currently in col	llege: Do you plar	n to attend college?	Yes □No				
e							
ool leadership, tea	m or individual sp	-	-				
Length	of Involvement	Titles or Positions	Contact Name and Phone # Of Supervisor				
	in school, name of pool completed. (Se pool completed. (Se pool of the pool of	in school, name of school or college ool completed. (Selected current or lead to be a school or college ool completed. (Selected current or lead to be a school or college of the school or college transcripts:   Based upon what scale on the currently in college: Do you plant to within the past several years that of the school or college transcripts:   at within the past several years that of the school or college transcripts:   at within the past several years that of the school or college.	in school, name of school or college: (Include full address, City, State college) completed. (Selected current or highest completed of High college) 11th 12th 12th 12th 13th 15th 15th 15th 15th 15th 15th 15th 15				

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special recognition you have earned:
Have you participated in any of the following?
□ JROTC/ROTC
☐ Civil Air Patrol
☐ Scouting (Highest Rank achieved)
☐ Organized Athletics (Outside of school)
Do you have any of the following?
FAA Ground School Completed? □Yes □No
FAA Class 1,2, or 3 Medical Certificate? □Yes □No
FAA Student Pilot Certificate? □Yes □No
Are you currently receiving flight instruction at a Part 141 or 61 Flight School? □Yes □No
Any Dual Flight Instruction Hours?   Yes  No  If Yes, how many hours of flight instruction received? Hours

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## Essay Question #1

1. Why do you want to become a pilot? (300 Words)

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## Essay Question #2

2. Describe your goals, near term and ultimate goals. Where do you see yourself in 5 years? (500 words)

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## Letters of Recommendation

Please attach two (2) letters of recommendation from individuals who can assess your qualities, characteristics, and capabilities of your character. They should have first-hand knowledge of your work habits and achievements, along with an understanding of what your ultimate pursuit is, by applying for this scholarship.

When thinking about who to ask to write your letter of recommendation, consider asking one of your teachers that you have worked with in school and who knows you on a personal level. You can also ask your school counselor, employer, coach, mentor, or another adult that will be excited to help you succeed. Asking someone who you have mutual respect for, knows your best skills, and is invested in your future will make your recommendation letter stand out.

Do not ask your parents or other family members to write the recommendation letter. We want to hear from someone who you have impressed, worked for, or taken classes from.

Recommendation letters must include length of time the individual has known the applicant and in what capacity. Specific examples should be used to describe the attributes of the applicant.

Limit your letter to one page.

Recommendation #1 Information
Name
Email Address
Primary Contact Number
Recommendation #2 Information
Name
Email Address
Primary Contact Number

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	Final Thoughts
We thank you for you	r time and effort to complete this application.
Is there anything else	you'd like to tell us?
I hear by certify that a to the best of my know	all statements and answers provided by me on this application form are complete and travledge.
evaluation/check ride)	wledge that if I attain my Private Pilot Certificate (by successfully passing the flight prior to 15 March 2024 I must immediately notify the Foundation, since applicants PPC are not eligible for an award.
Signature	Date
(INFORMATION IS	OPTIONAL AND NOT USED IN SELECTION PROCESS)
How did you receive	information about The Lyons Aviation Foundation?
☐ Website ☐ School	l □ Word of Mouth □ Internet Search □ Other