



**Regular Members Private Pilot License
SCHOLARSHIP APPLICATION**

(2) Awards: \$3,000 each

Completed applications must be received by February 15, 2010 – no exceptions

Name: _____

Address (Home): _____

City: _____ State: _____ Zip: _____

Phone (Home): _____ Phone (Work): _____

E-mail: _____

AWARD INFORMATION / ELIGIBILITY REQUIREMENTS

1. Applicant must be employed by an AEA Regular Member for no less than one year as an avionics technician or avionics manager.
2. Award money is to be used for achieving **PRIVATE PILOT SEL LICENSE** only. The award money is not intended for use in achieving any other ratings.
3. Award money is to be used for flight training costs only.
4. Award recipient must plan to pursue a **PRIVATE PILOT SEL LICENSE** within 6 months of receiving scholarship.
5. Award recipient must have a current 3rd class medical certificate or be eligible for one.
6. Award money will be sent to repair station manager for disbursement.

APPLICATION PROCEDURE

1. Write an essay of not more than 200 words explaining, "Why you believe having a pilot's license will benefit you and your employer." Important: essay must be typed and double spaced.
2. Submit the attached letter of recommendation as completed by your employer.

AEA MEMBERSHIP INFORMATION

AEA Member Company: _____

Company Address: _____

City: _____ State: _____ Zip: _____

Company Phone: _____ E-mail: _____

Applicant's Position/Title: _____ Start Date: _____

RETURN APPLICATION TO AEA BY FEB. 15, 2010

Mail: AEA Scholarships 3570 NE Ralph Powell Rd. Lee's Summit, MO 64064 Fax: 816-347-8405

**EMPLOYER RECOMMENDATION FORM for AEA REGULAR
MEMBER PRIVATE PILOT LICENSE SCHOLARSHIP**



Aircraft Electronics Association Educational Foundation Scholarship Application

Applicant's Name _____ Title _____

This student is applying for an AEA Educational Foundation scholarship. This scholarship will be used to pursue a private pilot's license. Please provide your views of the applicant as a person, as well as an employee.

	Poor	Below Avg.	Average	Good	Excellent
Initiative					
Reliability					
Performance					
Attitude					
Cooperation					
Teamwork					
Motivation					
Consideration of others					
Ability to follow instructions					
Willingness to accept responsibility					
Quality of work					

Please share your comments on this person. Please provide specifics if you checked any of the above below average or excellent.

Please recount an incident that would provide insight into this person's character, personality and values. Use an additional sheet if necessary.

I certify the above scholarship applicant is employed by:

Company Name _____ Phone _____

Address _____ City _____ ST _____ Zip _____

Your Name _____ Title _____

Responses are considered confidential