ABLE FLIGHT™ AT SIU SCHOLARSHIP

Application Checklist:

Applications that are not complete in every way will not be considered for an award.

Please assemble the following required items in this order:

[ ] After completing all items for the application, sign and date this form, and include a copy of this form as the first sheet of your application.

[ ] **Submit one copy of the scholarship application form including attachments**. Be sure to sign the application, and provide the required attachments in the following order:

[ ] Attach statement from your physician (see application for instructions).

[ ] Attach a photocopy of your driver's license.
To be considered for an Able Flight Training Scholarship Award for training for a Sport Pilot certificate, the applicant must hold a current and valid driver's license issued by their state.*

[ ] Attach your list of personal goals (see application).

[ ] Attach your essay (see application for instructions).

[ ] Attach two letters of recommendation (see application for instructions).

[ ] By checking this box and signing this form, and should your application be accepted for further review, you agree to be interviewed in person by an Able Flight representative. This interview will be conducted at a location convenient to you, and may be audio or videotaped. You also agree that, should you be selected for an award, you may be interviewed for print and electronic media in order to help publicize the Able Flight Scholarship awards program.

Applicant's signature_____Date_____

A signed copy of this checklist must be included with your application.

SCHOLARSHIP APPLICATION

Applications are accepted at any time.

1. Personal Information:

Full Name:

Address:

City: State: Zip:

Home phone:

Cell phone:

Work phone:

E-mail address**:**

2. Work History (last 5 years):

Employer(s): Position(s): Date(s):

3. Previous flight training experience? [ ] yes [ ] no

If answered yes to above, please list ratings and flight schools attended.

Ratings: Flight school(s) attended:

4. 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(s): Presented by: Date:

C. Scholastic Record - List all grades completed starting with highest level.

School: Location: Graduation date:

D. Attach a single page list of your personal goals.

E. Write and attach a 300-500 word essay describing how you feel an Able Flight Scholarship will change your life.

5. Supporting documents and letters of recommendation:

A. Attach a statement from your attending physician stating the nature of your disability and the effect(s) of the disability upon your level of physical activity. The physician's statement must be submitted with your application.

****VERY IMPORTANT: YOU MUST NOT INCLUDE ANY MEDICAL RECORDS OF ANY TYPE.****

B. Provide two letters of recommendation. One should be from someone who has known you for a number of years, (for example, a teacher, associate from work, etc.), **and** one from a family member (for example a parent, spouse, or a sibling), **or** from a close friend. The letters must be submitted with your application. Please have the writers provide a phone number or e-mail address by which they can be contacted. Please have the writer state their relationship to you.

Applicant's signature:_____Date_____

Please check to make sure that you have completed **all** of the items on the checklist and send your application to:

Able Flight at SIU
Scholarship Application
545 North Airport Rd
Murphysboro, IL 62901

Please be patient as your application is reviewed (calls and/or emails on application status are not accepted). After review, all applicants will receive a response concerning the status of their application.