

Palomar Chapter of the Ninety-Nines

Please check the scholarship for which you are applying:

☐ **Palomar 99s Student Pilot Scholarship**

Award Amount:	\$1,500
May be applied to:	Private pilot certificate only
Limitation:	120-day limit to apply funds to training
Deadline:	October 31, 2019
Eligibility requirements:	Female resident of San Diego County Between the ages of 17 and 99 Current medical certificate Student Pilot Certificate (through IACRA)

☐ **Palomar 99s Advanced Rating Scholarship**

Award Amount:	\$1,000
May be applied to:	One advanced certificate or rating only
Limitation:	ATP not eligible; 120-day limit to apply funds to training
Deadline:	March 31 st , 2020
Eligibility requirements:	Female resident of San Diego County or be a Member of the Southwest Section of the Ninety-Nines Current medical certificate Private Pilot Certificate

Please attach the following to your application:

- ☐ One-page essay (~600 words) detailing:
- What sparked your initial interest in flying?
 - General, career, and aviation goals.
 - Why you want this certificate or rating.
 - How this award will help you achieve your goals.
 - Obstacles you have had to overcome
 - Any aviation-related activities
 - How you would contribute to the Ninety-Nines and to the aviation community in general.

- ☐ Copies of:
- Medical certificate
 - Pilot certificate (front and back) or Student Pilot Certificate
 - Two most recent logbook pages

- ☐ Two Letters of Recommendation (each limited to one page)
- One which describes your character and experience outside of aviation, written by someone outside your family and outside of the aviation community.
 - One from a person knowledgeable about your interest in or accomplishments in aviation.

Provide email and/or phone contact information for each person issuing a letter of recommendation.

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Scholarship Application

Background Information:

Name: _____ Phone (home): _____

Address Line 1: _____ Phone (cell): _____

Address Line 2: _____ Email: _____

City: _____ State: _____ Zip: _____

Occupation: _____

Employer (or School attending) _____

If selected, for which certificate will this scholarship be used? _____

If a current Ninety-Nine or FWP, state chapter: _____

Aviation History:

Pilot Certificate(s) Held: _____ Date Issued _____

Date of current Medical Certificate: _____

Date of most recent Flight Review or checkride: _____

Total Flight Hours _____ Total PIC Hours _____

Type(s) of Aircraft Flown: _____

Hours flown in the last 30 days _____ 31-60 days _____

61-90 days _____ 91-120 days _____

Note: Please address any breaks in training or lack of currency in your essay.

If you are selected, to whom shall the award funds be paid? This must be the individual or organization providing your flight training:

Flight School or Flying Club name: _____

Instructor name (if applicable): _____

Phone: _____

Address Line 1: _____

Address Line 2: _____

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Scholarship Application

Notification: Scholarship winner will be notified by the scholarship chairperson, and all funds will be paid directly to a certified flight school, flying club, or CFI, upon receipt of invoice. Winner may be asked to submit a photo and flying biography for publicity purposes. Scholarship winner will have 120 days to use the scholarship funds.

Award Limitations: Applicants are not eligible to win more than one scholarship per certificate or rating per fiscal year, and no more than two scholarships per fiscal year from the Palomar Chapter 99s. The fiscal year runs from June 1st to May 31st. Scholarship monies are intended to help fund a certificate or rating and are to be applied to aircraft rental or flight instruction fees for the specific certificate or rating applied for in this application. Awards may **not** be used to pay for flying club dues/membership, ground school fees, books, or other pilot supplies.

Disclaimer: Neither the Palomar Chapter of the Ninety-Nines Inc., the Southwest Section of the Ninety-Nines, Inc., or the Ninety-Nines Inc. International, nor their members, agents or representatives (hereby "99s") are responsible for the quality of any training received with this scholarship, or for any accident, incident or any other event which may occur while the recipient of said award is performing flight training or activities relating thereto (hereafter "Flight Training"). The undersigned, on behalf of herself, her successors and assignees, hereby releases the 99s of any and all liability arising from or related to the Flight Training, and agrees to indemnify, defend and hold the 99s harmless from any loss that may occur as a result of or relating to Flight Training.

I declare under penalty of perjury that the information I have given is true and correct and that I meet the application requirements for this award. If I am declared the recipient of this scholarship, I agree to the terms of disbursement of funds for this award. I also understand that this application will be disqualified if found to be incomplete, fraudulent, or if postmarked (or electronically submitted) after the deadline.

Print Name: _____

Signature: _____

Parent/Guardian signature (if applicant is less than 18 years old):

Date: _____

Preferred method of submission:

Send the application as a PDF (as one file) to: Palomar99s@gmail.com

Note: To assist in processing, we ask that you please make every effort to submit your application electronically.

Or Alternate method of submission:

Send the completed application by mail to:
Palomar Chapter of the Ninety-Nines Scholarship Committee
c/o Glen Gillies
P.O. Box 3381
Rancho Santa Fe, CA 92067

Please contact the Palomar99s@gmail.com with any questions regarding the application.

For Palomar Ninety-Nines Scholarship Committee use: Application packet received on _____