



# The Colorado Ninety-Nines, Inc.

## FUTURE WOMAN PILOT SCHOLARSHIP APPLICATION FORM



Name: \_\_\_\_\_  
*Last First MI*

Address: \_\_\_\_\_  
*Street*

\_\_\_\_\_  
*City, State Zip*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Currently employed?  Yes  No

Current or last employer: \_\_\_\_\_  
*Employer Name, Job Title*

*Employer Address*

Highest grade/year attended: \_\_\_\_\_ Currently attending school?  Yes  No

Current or last school attended: \_\_\_\_\_  
*School Name Degree Major or Specialization*

*School Address*

Current medical/student pilot certificate?  Yes  No Date: \_\_\_\_\_

Solo date: \_\_\_\_\_ Total flight time in the last 60 days\* \_\_\_\_\_ Total flight hours logged\* \_\_\_\_\_

*\*Attach copies of logbook entries with each milestone highlighted.*



Ninety-Nines

Inspiring Women Pilots  
Since 1929

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Name of flight school, FBO, or qualified instructor you will use to obtain your primary pilot certificate:

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*Street Address City, State ZIP*

Have you applied for another aviation scholarship this year?     Yes     No

If yes, describe the award and award status: \_\_\_\_\_

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**Assemble a complete application package and submit as directed on the INSTRUCTIONS page**  
**([www.colorado99s.org/scholarship](http://www.colorado99s.org/scholarship)).**

### DECLARATION and AGREEMENTS

I understand this scholarship is only to be used to complete my primary (very first) pilot certificate. I understand the funds from this scholarship are to be used for flight training only, received up to and including May 31, 2020. I understand that scholarship funds are disbursed directly to my flight training institution. If I obtain my primary pilot certificate or quit flight training before using the entire scholarship, the unused funds are to be returned to the Colorado Ninety-Nines. I certify that all information in this application is true and correct.

\_\_\_\_\_  
*Applicant Signature* *Date*

If applicant is under the age of 18, a legal guardian must also sign:

\_\_\_\_\_  
*Legal Guardian* *Date*

### DISCLAIMER

Neither the Colorado Chapter of The Ninety-Nines, Inc.; the South Central Section of the Ninety-Nines, Inc.; and The Ninety-Nines, Inc.; or their members, agents, or representatives are responsible for the quality of any training received with this scholarship, nor for any accident, incident or any other event which may occur while I am performing flight training or activities relating thereto, and I agree to hold harmless said entities.

\_\_\_\_\_  
*Applicant Signature* *Date*

If applicant is under the age of 18, a legal guardian must also sign:

\_\_\_\_\_  
*Legal Guardian* *Date*