

Illinois Pilots Association Memorial Scholarship Application (electronic submission version)

Name

Last

First

Middle

Home Address:

Street or RR#

City:

State:

Zip:

County:

Telephone ()

Date of Birth

Place of Birth

If you are awarded the IPA Memorial Scholarship, to which Illinois college will it be applied?

Year of school completed by June, 2018:

Major:

Minor:

Career Interests:

Please list below the three persons who will send references and indicate their relationship to you. At least one must be a teacher who has had you in class. Please supply their email addresses if possible. They may submit their recommendations by email.

1.

2.

3.

Activities: (List participation, offices held, awards, honors, etc., and take as much space as you need.)

Athletics:

School Organizations:

Other organizations, significant interests, hobbies and/or activities:

Briefly state, in your own words, the reasons you feel you deserve this scholarship. Please include a discussion of your past accomplishments and your future goals, as well as your financial need. Please use as much room as you need.

Return completed form to: Illinois Pilots Association
c/o Kimberly Bush
PO Box 276
Liberty, IL 62347

or email this top portion as a text attachment to kbush@illinoispilots.com. Please note that the Signature Form at the end of this application must be detached and mailed in.

Completed application must be received by April 30, 2018.

The completed application must include:

1. this form;
2. current college transcript (if transcript is for less than two terms, send other evidence of scholarship as well, such as high school transcript, ACT scores, etc.);
3. **three** letters of reference (use Recommendation forms provided),
4. **and** a signed and dated Signature Form, which must be mailed.

An unofficial transcript will be accepted. The recipient will be required to submit an official, sealed transcript.

SIGNATURE FORM

I emailed the first portion of my application for the IPA Memorial Scholarship on
(month/day/year): _____

Print full name: _____

Signature of Applicant _____ Date _____

Detach and return completed Signature Form to:

Illinois Pilots Association
c/o Kimberly Bush
PO Box 276
Liberty, IL 62347

Occasionally, other aviation organizations offer memorial or other special scholarships. Please initial here if you are willing to have your completed application shared with such organizations.

RECOMMENDATION

(electronic submission version)

(Insert applicant's name) is applying for the Illinois Pilots Association Memorial Scholarship and is listing you as a reference on the application. This scholarship is to be used toward an aviation-oriented career.

If you feel that you would like to write a letter, either in place or in addition to this form, please do not hesitate to do so. We assure you that any information will be held in confidence.

Please take as much space as you wish for the following four questions.

1. In what capacity do you know the applicant?
2. What are the applicant's strongest characteristics?
3. What are the applicant's weakest characteristics?
4. If you are a teacher, in what subject areas?
5. How would you rank the applicant on the following? (Please erase the rankings that do not apply.)

Imagination	Poor	Average	Good	Excellent
Initiative	Poor	Average	Good	Excellent
Responsibility	Poor	Average	Good	Excellent
Emotional Stability	Poor	Average	Good	Excellent
Leadership	Poor	Average	Good	Excellent
Ability to work with others	Poor	Average	Good	Excellent
Work Habits	Poor	Average	Good	Excellent
Self-motivation	Poor	Average	Good	Excellent
Intelligence	Poor	Average	Good	Excellent
Communication	Poor	Average	Good	Excellent

Please comment on any factors (assets, liabilities, circumstances, etc.) which you feel should be taken into consideration in our evaluation of this applicant. Please take as much space as you wish.

Recommender's name: _____

Address _____

Street or RR#

City _____ State _____ Zip _____

Daytime Telephone (_____) _____

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