

# The Tailwind Foundation, Inc.

## Advanced Rating or Certificate Scholarship Application

**Instructions:**

1. Print out and complete this application. Be sure to fill the application out **completely**.
2. Take your time and write legibly, especially your contact information.
3. Attach a short essay or letter (**two pages or less**) describing your aviation goals, work experience, educational background, and financial needs.
4. Send the completed package to:

**The Tailwind Foundation, Inc.**  
**15480 See Street**  
**Rogers, AR 72756**

Please type or print clearly:

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

E-Mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Are you a U.S. Citizen?  Yes  No  Male  Female

Do you support yourself financially?  Yes  No

Are you responsible for the costs associated with flying?  Yes  No

If no, who is the responsible party? \_\_\_\_\_

Please specify the amount of the scholarship you are applying for: \$ \_\_\_\_\_

List any post-secondary schools you have attended (Colleges, VoTech, etc.)

\_\_\_\_\_  
\_\_\_\_\_

List any extracurricular, civic, and community activities you participate in:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What certificates / ratings do you hold? \_\_\_\_\_

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As a result of an investigation by the FAA, have you ever been issued:

- Warning     Letter of Correction     Order of remedial training  
 Reexamination (check ride)     Issuance of violation and sanction

If so, please attach a separate sheet explaining the incident or accident.

Do you have a current medical?     Yes     No    If yes, what class? \_\_\_\_\_

Are you currently taking flying lessons:     Yes     No

<p>If you answered <b>"Yes"</b> to the question above, please provide the following information:</p> <p>What certificate / ratings are you working on? _____ (Please note that this scholarship only covers work on the Private Pilot certificate)</p> <p>How many hours total flight time do you have? _____ Dual _____ Solo _____</p> <p>Have you passed your written exam?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>Where / from whom are you taking flying lessons? _____ (Please provide phone number where your instructor can be reached)</p> <hr/> <p>If you answered <b>"No"</b>, please provide the following information:</p> <p>Have you taken flying lessons in the past?    <input type="checkbox"/> Yes    <input type="checkbox"/> No If yes, where? _____ Total Time _____</p> <p>Where / from whom do you intend to take lessons? _____</p>
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Provide two references who can provide endorsement for your application:

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
Phone / Contact Number

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
Phone / Contact Number

**If you are selected as a finalist for a scholarship**, you will be asked to interview with our selection panel. You may also be asked to consent to a **background check** at that time. Our purpose for conducting background checks is to ensure that the foundation awards scholarships to individuals who have shown good judgment in their personal lives and in their financial dealings. If you are unwilling to consent to a background check, please reconsider submitting an application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian Signature (if under 18 years of age)

\_\_\_\_\_  
Date