



Boshears Skyfest Scholarship Application Form 2015
Must be submitted along with essay no later than 5 PM October 2, 2015

Name:

Address:

City:

State:

Zip Code:

Home Phone Number:

Cell Phone Number:

Email Address:

Birthday:

Current Age:

Current Grade:

Name of School:

School Location:

GPA:

(Please attach proof from school counselor or transcript)

Future Plans:

Do you have any flying experience:

Yes:

No:

If so, what kind and how much?

What Extra Curricular Activities are you involved in?

Do you understand the qualifications and criteria that must be met if you are awarded any of the scholarships?

Do you pledge to fulfill the requirements of the scholarship to the best of your ability?

List all medications you are currently taking:

Name of Parents or Legal Guardian:

Daytime Phone Number for Parent or Legal Guardian:

Evening Phone Number for Parent or Legal Guardian:

Signature:

Date:

ATTACH ESSAY OF AT LEAST 300 WORDS ON “WHY I WANT TO BE A PILOT.”