

## **SY2016 - 2017 SCHOLARSHIP APPLICATION** *FOR GEORGIA HIGH SCHOOL GRADUATES*

1.	Applicant Name:				
2.	Mailing Address:				
3.	Telephone #:				
4.	E-mail Address:				
5.	High School Name & City:			, GA	
	Contact Name:				
		Phone:	Email:		
6.	College Name, City & State:				
	Contact Name:				
		Phone:	Email:		
7.	How did you learn about the G	BAA Scholarsh	nip?		
8.	Have you ever applied for or be	een awarded a	GBAA Scholarship? If so, when:		
	(a). Please select (check) one	of the followin	ng aviation scholarships:		
	☐ Flight Technology (professional pilot) ☐ Aviation Maintenance (A&P Maintenance Technician)				
	☐ Other Aviation Disciplines (Air Traffic Control, Airport Management, Aerospace Engineering, etc.)				
	☐ Satcom Direct "Aero IT" Certification (configuration & troubleshooting of satcom systems)				
	(b.) If you are applying to more than one scholarship, please complete a separate application for each and include with your original scholarship package				
9.	<ul> <li>9. Your application must be accompanied by: <ul> <li>(a) Your essay (as described in the Application Requirements)</li> <li>(b) One (1) letter of recommendation from a school official or other advisor / mentor</li> <li>(c) Your high school transcript (or GED equivalent), confirming your GPA and graduate status</li> <li>(d) Your college transcript (if already enrolled), confirming your GPA and full-time enrollment status</li> </ul> </li> </ul>				
10	. Application package must be p	oostmarked by	March 1, 2016 (GBAA, PO Box 43327, Atl	anta, GA 30336).	
IC	Certify That All Information Cor	ntained In My A	Application Package Is True And Complete	e.	
App	olicant Signature:		Date:		