



**Orange County Ninety-Nines Scholarship Application**

All applications must be signed and received by **May 15th of the current year.**

Scholarship Title: **Orange County 99s Aviation Scholarship**

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

99s' Membership #: \_\_\_\_\_

Chapter Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone # (Home): \_\_\_\_\_ (Cell): \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you currently employed? \_\_\_\_\_

If yes, check one: \_\_\_\_\_ part-time \_\_\_\_\_ full time

Please state your specific purpose for the use of this scholarship: \_\_\_\_\_

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

Scholarship will be used for \_\_\_\_\_ rating/certificate

Current ratings, if any: \_\_\_\_\_

Airman certificate #: \_\_\_\_\_

Medical Class: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Total flight time: \_\_\_\_\_ hours || PIC time: \_\_\_\_\_ hours

BFR date: \_\_\_\_\_



**Aviation Experience:**

Written tests passed: \_\_\_\_\_

Types of aircraft flown: \_\_\_\_\_

Multi-engine hours: \_\_\_\_\_ Instrument hours: \_\_\_\_\_

Other aviation related education, if any: \_\_\_\_\_

\_\_\_\_\_

Other professional or aviation organizations you are a member of: \_\_\_\_\_

\_\_\_\_\_

Please list any aviation violations, incidents, or accidents you have had: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Ninety-Nines Offices & Involvement:**

List all offices you have held: \_\_\_\_\_

\_\_\_\_\_

Activities participated in: \_\_\_\_\_

\_\_\_\_\_

Chapter/Business Meetings attended: \_\_\_\_\_

List the committees that you have been a member of, including dates: \_\_\_\_\_

\_\_\_\_\_

List dates and locations of Section and/or International Meetings have you attended? \_\_\_\_\_

\_\_\_\_\_

List the 99s' fly-ins you have participated in: \_\_\_\_\_



What other activities or programs were you a part of: \_\_\_\_\_

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**Essay Questions (500 words or less):**

*Please answer the following questions on a separate sheet of paper in essay format:*

1. What inspired you to get into aviation?
2. What are your long-term goals in aviation? What steps have you taken to achieve your goals? What is your plan of action to reach your goals?
3. What aviation-related activities have you participated in (including employment) that mean the most to you?
4. How would you contribute to The Ninety-Nines and to the aviation community in general?

**Letter of Recommendation:**

Please include **one (1)** letter of recommendation from non-family members (e.g. teacher, person in aviation who knows you, current or former employer, guidance counselor, clergy, etc.)

**Requirements for ALL APPLICANTS:**

- Signed scholarship application (all pages)
- Signed scholarship award attestation
- Typed or clearly printed essay
- Letter of recommendation
- Photocopy of current medical
- Photocopy of all aviation licenses and certificates
- Proof of Ninety-Nines required membership
- Copies of at least 2 pages of your pilot logbook, if applicable

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Applications must be signed and received by midnight on May 15th of current year.**

**Applications must be submitted via email (.PDF format) to [OCninetynines@gmail.com](mailto:OCninetynines@gmail.com)**

**All documents submitted must be combined into a single.pdf file attachment**



## Scholarship Award Attestation

***By my signature below, I certify that:***

1. I meet the eligibility requirements for the Orange County 99s Aviation Scholarship.
2. My scholarship application reflects an honest appraisal of my ability to complete the goal stated.
3. My scholarship application is complete, true and correct in every respect.
4. I understand that any misrepresentation, concealment, or omission of required information will result in disqualification and withdrawal of remaining scholarship award.
5. I understand that no reimbursement will be made for travel/food/lodging expenses associated with training.
6. I understand that no payment will be made before the scholarship chairman has received the signed scholarship award attestation from the recipient, signifying agreement to the stated terms of the award.
7. I assume full responsibility for meeting all deadlines and tracking the progress of my scholarship application through the review and selection process.

***I further certify that, if awarded an Orange County 99s Aviation Scholarship, I will:***

- A. Send a color headshot photo and brief biographical statement of 200 words or less within two weeks following the formal Pilot of the Year Banquet.
- B. Use the funds solely for the specific purpose stated on my scholarship application.
- C. Use the scholarship award within one year of the formal Pilot of the Year Banquet.
- D. Communicate training status to the scholarship chairman in writing or via email and provide timely notification of changes to personal contact information.
- E. Report my training status by attending at least one Orange County Chapter of the Ninety-Nines meeting within one year of receipt of my award or to submit a written report if unable to attend. Present an additional report upon completion of the use of the scholarship award outlining my status and training accomplishments.
- F. I acknowledge that I meet all the requirements to receive/maintain my pilot license or A&P or additional ratings. I agree that I will continue to meet all the requirements necessary to receive/maintain my pilot license or A&P or additional ratings during the pendency of this scholarship award.



### ***Reimbursement Clause***

As the recipient, you must complete the rating or training appropriate to your award within one year of the award date. Special adverse circumstances will be considered if this goal is not met and your status will be reviewed by the scholarship committee. Receipts showing progress of training and signed by both student (recipient) and instructor must be submitted to the scholarship committee before the 2nd half of funds are awarded. Receipts showing completion of training and signed by both student (recipient) and instructor must be submitted to the scholarship committee within one year of the award date. **If your progress is not acceptable to the Orange County 99s Aviation Scholarship committee, all funds paid toward achieving your rating must be reimbursed to the Orange County 99s Aviation Scholarship fund within 60 days of that decision.**

I, \_\_\_\_\_, agree to the terms of this scholarship.

Scholarship applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

***A signed copy of this Scholarship Award Attestation must accompany the completed Orange County 99s Aviation Scholarship Application.***



**Hold Harmless:**

*Neither the Orange County Chapter of the Ninety-Nines International Organization of Women Pilots, Inc., the Southwest Section of the Ninety-Nines International Organization of Women Pilots, Inc., nor 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 the recipient of this scholarship is performing flighting training, or activities related thereto. I hereby release the Ninety-Nines and any of its affiliated organizations for all actions, claims, or demands that I, my assignees, heirs, distributees, guardians, and legal representatives now have or may hereafter have for injury or damage resulting from my participation in any activities related to this scholarship.*

*I hereby certify that I have read and agree to be bound by the instructions to applicants. I understand that the scholarships are offered by individual groups/organizations and that The Ninety-Nines, Inc. has no responsibility or liability whatsoever for any scholarships or awards or the quality of training received. It is my sole responsibility to assure timely receipt of my application by the deadline.*

*I agree to abide by all the terms and conditions specified on this application. I declare under penalty of perjury that the information I have given here is true and correct and that I meet the eligibility requirement for the scholarship sought.*

Applicant Name (Printed): \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Application Deadline is midnight on May 15th of the current year.**

*For Orange County Ninety-Nines scholarship committee use: application packet received on \_\_\_\_\_*