Mitchell Cary–Don Gum Memorial Aviation Scholarship Application Instructions

The National Aviation Heritage Alliance (NAHA) has established a scholarship in honor of Mitchell Cary and Don Gum, who lost their lives in 2011 in the commemoration of the Wright Brothers' invention of aviation. The scholarship will provide \$1,500 financial assistance for students working toward a Sport or Private Pilot's Certificate.

What it covers

All scholarship-financed ground school and flight instruction is to be conducted at a FAA certified flight school. The purpose of the scholarship is to pay for the direct cost of flight training towards receipt of a private pilot or light sport pilot certificate. The funds are not to be used for an advanced certification or rating, or for ground school, insurance fees, training materials or flight related equipment (e.g. headsets).

Flight school approval required

The scholarship winner's flight school must approve of the scholarship because the scholarship funds will be disbursed to the school. When the scholarship is awarded, the flight school will be required to fill out a basic form (attached) and furnish proof of insurance. As the school conducts flight training, it will invoice NAHA for the cost of the training and NAHA will reimburse the school directly, not through the student, up to \$1,500. NAHA will not be liable for any expenses in excess of \$1,500. Scholarship funds are available for 18 months from date of award.

Who is eligible

Youths who are interested in careers in aviation and are between the ages of 15 and 21 who are residents of Auglaize, Champaign, Clark, Greene, Miami, Montgomery, Shelby, and Warren counties are invited to apply for the Cary-Gum Memorial Aviation Scholarship.

- A. To apply for the Cary-Gum Scholarship, the applicant must:
- B. Be between 15 and 21 years old.
- C. Be a resident of one of the eight counties in the National Aviation Heritage Area or a full-time student in a school located in one of those counties. Those outside the Area who have completed Air Camp and meet the other requirements are also eligible. (Please visit aircrampusa.com for more information about Air Camp. Air Camp is a NAHA partner.)
- D. Be able to pass a Third Class flight physical or, for a Sport Pilot certificate, hold a current Ohio drivers' license.
- E. Complete the application form provided with this letter.

- F. Submit a resume that includes name, address, telephone number, email address, academic qualifications (including courses taken and grades achieved), extra- curricular activities, and previous ground school and Nlight training.
- G. Write an essay discussing his/her interest in an aviation career. The essay must be typed double-spaced and be a minimum of one page in length. Proper grammar and spelling are important.
- H. Submit one or more letters of recommendation from teachers, Scout leaders, Civil Air Patrol leaders, etc.
- I. List any previous flight instruction and submit a letter of recommendation from the student's previous flight instructor(s), if applicable.
- J. List any previous financial assistance (grants, scholarships, etc.) the student has received for flight instruction.
- K. Must be able to complete the training within 18 months of the award.

Mail your application package to: National Aviation Heritage Alliance Cary-Gum Aviation Scholarship Committee PO Box 414, Wright Brothers Station, Dayton, OH 45409

Email application packages are also accepted at: mdw@aviationheritagearea.org

Application packages must be received by <u>March 1</u> of each year. The award will be announced in late April or early May.

If you have questions, contact NAHA at mdw@aviationheritagearea.org. No phone calls, please.

MITCHELL CARY-DON GUM MEMORIAL AVIATION SCHOLARSHIP APPLICATION FORM
DATE: ______
NAME: ______ DATE OF BIRTH: ______
HOME ADDRESS: _______
PHONE: ______ E-MAIL: ______

I wish to participate in the Cary-Gum Aviation Scholarship program, which will include aviation ground school and Nlight training. I certify that the above information is true. I agree to hold harmless all participants and sponsors of the Cary-Gum Aviation Scholarship program which includes the National Aviation Heritage Alliance, the Aviation Heritage Foundation, Inc., its Board of Trustees, officers, volunteers, and paid staff, those who contributed funding to the Scholarship program, and those involved in the selection process for Cary- Gum Aviation Scholarships for any and all personal injury, loss of life, and /or property loss or damage which might result from participation in Nlight training, travel to and from Nlight training, or any other aspect of the Cary-Gum Aviation Scholarship program.

STUDENT SIGNATURE:	DATE:	STUDENT NAME
(PRINTED):		

IF YOU ARE LESS THAN 18 YEARS OF AGE, YOUR PARENT OR LEGAL GUARDIAN MUST ALSO

COMPLETE THE FOLLOWING:

wishes to participate in the Cary-Gum Aviation Scholarship program, which will include aviation ground school and flight training. I certify that I am the child's legal guardian, and I give him/ her permission to participate in this program. I also agree to hold harmless all participants and sponsors of the Cary-Gum Aviation Scholarship program which includes the National Aviation Heritage Alliance, the Aviation Heritage Foundation, Inc., its Board of Trustees, officers, volunteers, and paid staff, those who contributed funding to the Scholarship program, and those involved in the selection process for Cary-Gum Aviation Scholarships for any and all personal injury, loss of life, and /or property loss or damage which might result from participation in Nlight training, travel to and from Nlight training, or any other aspect of the Cary-Gum Aviation Scholarship program.

PARENT / LEGAL GUARD	IAN SIGNATURE:	DATE:
PARENT / LEGAL GUARD	IAN (PRINTED):	
HOME ADDRESS:		
PHONE:	EMAIL:	

Mitchel Cary - Donald Gum Memorial Aviation Scholarship Flight School Information and Agreement

Date:

NAME OF FLIGHT SCHOOL: OWNER OF FLIGHT SCHOOL: AIRPORT OF OPERATION: ADDRESS: E-MAIL: WEB SITE URL: SCHOOL CAPABILITY: SCHOOL TYPE: Part 141 ___ Part 61 ___ Month/year established at present location: _____

TRAINING CAPABILITY AND EXPERIENCE:

CERTIFICATE TRAINING CAPABILITY (enter YES or NO)	Sport	Private	Commercial	ATP
# STUDENTS TRAINED/ # CERTIFICATES AWARDED IN PAST 12 MONTHS	/	/	/	/
Ratings/ endorsements offered (Y or N)	Instrument	Multi-engine	Tail wheel	CFI

LIST TYPE OF AIRCRAFT AND NUMBER OF EACH USED FOR TRAINING BY THE SCHOOL:

INSURANCE ARRANGEMENTS:

List Flight School's liability insurance coverage by type and amount. PLEASE ATTACH A COPY OF YOUR INSURANCE COVERAGE DOCUMENT FROM YOUR INSURANCE COMPANY.

Туре:	\$ INSURER:
Туре:	\$ INSURER:

Describe insurance required by student: _____

OTHER INFORMATION THAT DESCRIBES THE SCHOOL'S CAPABILITIES OR OPERATIONS:

AGREEMENT:

_______agrees to participate in the Cary-Gum Flight Scholarship program by providing flight training to the flight student awarded the Cary-Gum Flight Scholarship by the National Aviation Heritage Alliance (NAHA), [Aviation Heritage Foundation, lnc., a 501(c)(3) corporation].

- I certify that the above information is true.
- All arrangements for the training, including insurance, will be made between the student (and legal guardian, if under 18) and the school and will not involve the NAHA.
- The Nlight school agrees to receive payment(s) for training conducted not to exceed \$1500.00 total after submission of an invoice(s) for such payment to the NAHA.
- I agree on behalf of the flight school to hold harmless, all participants and sponsors of the Cary-Gum Aviation Scholarship program, which includes the National Aviation Heritage Alliance, Aviation Heritage Foundation, Inc., its Board of Trustees, officers, volunteers, and paid staff, those who contributed funding to the Scholarship program, and those involved in the selection process for Cary-Gum Aviation scholarships, for any and all personal injury, loss of life, and/or property loss or damage which might from participation in any part of the Cary-Gum Aviation Scholarship program.

FLIGHT SCHOOL RESPONSIBLE OFFICER SIGNATURE:
FLIGHT SCHOOL RESPONSIBLE OFFICER, PRINTED NAME:
ADDRESS:
TELEPHONE NUMBER:
EMAIL ADDRESS: