

# SCAA Scholarship Application

I have read and understand the scholarship program description, I further state that all the information given below is accurate, to the best of my knowledge.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Please Print

Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail address \_\_\_\_\_

Legal Residence: State \_\_\_\_\_ County \_\_\_\_\_

High School \_\_\_\_\_

*The below information is only needed if you have not yet graduated or you recently graduated highschool.*

High School Class Rank \_\_\_\_\_ Grade Point Average \_\_\_\_\_ Expected graduation date \_\_\_\_\_

College/Technical School Selection \_\_\_\_\_

Academic Discipline \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Financial Aid Department Contact \_\_\_\_\_ Telephone \_\_\_\_\_

Acceptance Date \_\_\_\_\_ Semester Start Date \_\_\_\_\_ Est. Graduation Date \_\_\_\_\_

\*Referring Member \_\_\_\_\_ Phone \_\_\_\_\_



*Return completed application to  
SCAA, PO Box 12067, Columbia, SC 29211  
or email to [scaa@scaaonline.com](mailto:scaa@scaaonline.com) by  
June 1, 2019*



Please list any academic institutions you have attended or specialized aviation oriented technical or military training you have received:

<u>Name</u>	<u>Address</u>	<u>Dates Attended</u>

Use the space below to write a brief paragraph concerning your request for this scholarship.

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Use the space below to write a brief paragraph that outlines your educational goals and career plans.

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Your application must be accompanied by:

- (a) One (1) letter of recommendation from an SCAA member.
- (b) Your high school transcript (or GED equivalent), confirming your GPA and senior / graduate status\*
- (c) Your college transcript (if already enrolled), confirming your GPA and full-time enrollment status