## Alaskan Aviation Safety Foundation DALE CARLSON MEMORIAL SCHOLARSHIP APPLICATION FORM

## 2015-2016

| Date of application:                    |                             |              |           |    |            |          |       |  |
|---|-----------------------------|--------------|-----------|----|------------|----------|-------|--|
| Name                                    |                             |              |           |    |            |          |       |  |
| Address                                 | Pho                         | Phone ()     |           |    |            |          |       |  |
| City                                    |                             | State        |           |    | _ZIP       |          |       |  |
| Email address                           |                             |              |           |    |            |          |       |  |
| Occupation                              |                             |              |           |    |            |          |       |  |
| Flight Training:                        |                             |              |           |    |            |          |       |  |
| School or Instructor                    | Certificate or Ratin        | ng           | Date      | No | . of Hou   | rs at th | e tim |  |
|   |                             | /            |           | /_ | (5)        |          |       |  |
|   |                             |              |           | /_ |            |          |       |  |
|   |                             |              |           |    |            |          |       |  |
| Aircraft Owned:                         |                             |              |           |    |            |          |       |  |
| Make and Model                          | N Number                    | Year Pu      | rchased   | Но | ars in thi | s aircra | aft   |  |
|   |                             | :            |           | /  |            |          |       |  |
|   | //                          |              |           | /  |            |          |       |  |
| 9.1191111111111111111111111111111111111 | //                          |              |           | /  |            |          |       |  |
| Aviation-related activi                 | ties: (Memberships, a       | ctivities or | interests | s) |            |          |       |  |
|   | 10-2                        |              |           |    |            |          |       |  |
|   |                             |              |           |    |            | 80       |       |  |
|   |                             |              |           |    |            |          |       |  |
|   | a                           |              |           |    |            |          |       |  |
| Aviation-related work                   | <b>experience:</b> (if any) |              |           |    |            |          |       |  |
| Company                                 | Duties                      |              |           |    | Dates      |          |       |  |
|   |                             |              | //        | /  | to         | _/       | _/    |  |
|   | M                           |              |           | /  | to         | _/       | _/    |  |
| 1                                       |                             |              | / /       | 1  | to         | 7        | 1     |  |

## Alaskan Aviation Safety Foundation DALE CARLSON MEMORIAL SCHOLARSHIP APPLICATION FORM (continued)

| Why are you         | applying for a spidertracks tracking device?                               |
|---------------------|--|
| -                   |  |
|                     |  |
|                     |  |
| Why don't yo        | ou currently have a spidertracks tracking device?                          |
|                     |  |
| Describe the tetc.) | type of flying you do most often: (wheels, floats, off airport, day trips, |
|                     |  |
|                     |  |
| Describe the        | safety items currently carried in your aircraft:                           |
|                     |  |
|                     |  |
| Why are you         | the most qualified applicant for this scholarship?                         |
|                     |  |
|                     |  |
|                     |  |
|                     |  |

| If you are not awar   | ded a spidertracks tra                               | acking device, will you:   |
|-----------------------|--|--|
| Purchase one          | anyway   | Purchase something else  |
| Not purchase          | any tracking device                                  | Unsure at this time  |
|                       | r Flying, at a safety ser                            | would you be willing to participate and share minar and/or online with spidertracks? |
| The following items   | must be attached to thi                              | is application:  |
|                       |  | ot's license, driver's license, PFD receipt, etc.)                                   |
|                       |  | (copy of current license)  |
|                       |  |  |
| -1 1001 01 and        | tait ownership (copy o                               | of aircraft registration, lease agreement, etc.)                                     |
| my knowledge.         | 1 - 12 0   |  |
| Applicant's signature | e  | Date   |
|                       | n to: <u>aasfonline@gmai</u><br>LARSHIP" in the subj | l.com and include: "DALE CARLSON ect line, or mail to:                               |
|                       | ALASKAN AVIATI                                       | ION SAFETY FOUNDATION  |
|                       | DALE CARLSON M                                       | MEMORIAL SCHOLARSHIP COMMITTEE   |
|                       | 2811 Merrill Field D                                 | rive   |
|                       | Anchorage, Alaska 9                                  | 9501   |
| For more information  | n call us at (907) 243-7                             | 7237   |
|                       |  |  |