2022 Poplar Grove Aviation Education Association
Vintage Wings & Wheels Museum
Scholarship Application

Name: _____ Birth Date:_____
First Middle Last Month/Day/Year

Address: _____
Street City County State Zip

Phone Number: _____ Email: _____

Name of school or aviation program for this scholarship application:
_____

School address: _____
Street

_____
City State Zip

Present or Intended Course of Study: _____

Degree/Certificate: _____ Expected Graduation Date: _____
Month/Year

Previous/Current Education:

_____
School Dates Attended Program Graduate Y or N

_____
School Dates Attended Program Graduate Y or N

Other Pertinent Education: (ie. aviation written exams passed, ratings, medicals, etc.)
_____

_____

Current Employer: _____ Phone Number: _____
(If applicable)

- I understand that any awards are to be used ONLY for the education program for which I am applying.
- I attest to the fact all information submitted in this application and the essay is accurate.
- Scholarship awards will be in the form of a check made out to the recipient and the education facility being attended.
- Entire application package must be postmarked by **March 31, 2022.** Mail application, references and essay to Poplar Grove Vintage Wings and Wheels Museum, 5151 Orth Rd, Ste A-1, Poplar Grove, IL 61065.

Applicant's signature: _____