

**THE MARLENE MORRIS MEMORIAL FLIGHT TRAINING SCHOLARSHIP
2002 FACT SHEET**

Criteria For Selection:

- A. Must be female with at least a private pilot certificate.
- B. Must be a resident of Louisiana.
- C. Must show financial need.
- D. Must follow the instructions on this fact sheet.

Selection of Scholarship Recipient:

The Marlene Morris Memorial Scholarship Committee will screen applications at the October meeting of the New Orleans 99s. Independent judges will make the final selection. The scholarship recipient will be notified no later than October 31, 2002, of her selection. The decision of the scholarship committee is final. If no qualified recipient applies the scholarship committee reserves the right to withhold the scholarship.

Original Application Must Include:

- A. Completed application and eligibility forms.
- B. Applicant Statement which must include the following:
 - 1. Certificate or rating applying for.
 - 2. How you became interested in aviation.
 - 3. Why you chose aviation as a career.
 - 4. Specific career goal.
 - 5. How this scholarship will help you attain your goal.
 - 6. Financial need.
 - 7. Any aviation, educational, and/or employment accomplishments.
 - 8. Outside activities and/or organizations, not necessarily aviation-oriented.
- C. One letter of recommendation from a college faculty member or a person knowledgeable of your aviation activities and accomplishments.
- D. Copy of your pilot certificate(s), your current medical certificate, and your current flight review.
- E. Must be typewritten or printed legibly, in ink.
- F. Two (2) additional copies of Items A-D.

Disbursement Of Funds:

Funds will be disbursed as expenses are presented to the scholarship committee.

Recipient's Accountability:

The time to acquire the certificate or rating is limited to 12 months after the receipt of the scholarship. Should the scholarship disbursement period exceed one calendar quarter, the recipient must submit a quarterly report to The New Orleans 99s until the funds are exhausted.

Submit Application Materials to
NEW ORLEANS 99s
c/o Lisa Cotham, Scholarship Chairman
10436-G Jefferson Hwy.
Baton Rouge, LA 70809 (225) 293-4359
lisacot@earthlink.net

MUST BE POSTMARKED NO LATER THAN OCTOBER 1, 2002

THE MARLENE MORRIS MEMORIAL FLIGHT TRAINING SCHOLARSHIP

THE NINETY-NINES, INC
NEW ORLEANS CHAPTER

CERTIFICATE OR RATING APPLYING FOR

The New Orleans Chapter of The Ninety-Nines, Inc., the world's oldest organization exclusively for women pilots, is proud to sponsor The Marlene Morris Memorial Flight Training Scholarship. The purpose of this \$500 scholarship is to provide flight training assistance to a woman living in Louisiana who is pursuing a career in aviation. Any female pilot 18 years of age or older who holds at least a private pilot certificate is eligible to apply.

Applications will be judged on sincerity of purpose and need of financial assistance as well as compliance with application requirements and neatness. **APPLICATIONS MUST BE POSTMARKED NO LATER THAN OCTOBER 1, 2002. APPLICATIONS NOT COMPLETED AS SPECIFIED WILL NOT BE CONSIDERED.**

PERSONAL INFORMATION:

Name _____
Address _____
Telephone: Day _____ Evening _____ E-mail _____

AVIATION BACKGROUND:

Certificate Held _____ Date Issued _____ Total Hours ASEL _____ AMEL _____
Ratings Held _____ Hours Last 90 Days _____ Writtens Passed _____

Total Hours	Dual Received	PIC	X-C PIC	Instrument	Night	As Flight Instructor

Date of Last Medical _____ Class _____ Date of Last Flight Review _____
Have you ever had a pilot certificate suspended or revoked? ____ Have you ever had a medical certificate denied? ____
If yes to either question, please attachment a statement of explanation.
Are you currently enrolled in a flight training program? ____ For what Certificate or Rating? _____

EDUCATIONAL BACKGROUND: List all educational institutions attended, beginning with high school. Use a separate sheet, if necessary.

<u>School</u>	<u>Location</u>	<u>Dates Attended</u>	<u>Degree Received</u>

EMPLOYMENT HISTORY: List current and previous employer.

<u>Employer's Name</u>	<u>Location</u>	<u>Dates Employed</u>	<u>Position Held</u>

**ELIGIBILITY STATEMENTS FOR
THE 2002 MARLENE MORRIS MEMORIAL FLIGHT TRAINING SCHOLARSHIP**

The following is to be completed by a responsible official of the flight school or the independent flight instructor who will be providing the instruction.

I have examined the credentials (certificate, logs, etc.) of the applicant and find her to be fully qualified to accomplish the following certificate or rating:

Grade of Certificate or Rating Sought _____

Make(s) and Model(s) of Aircraft to be Used _____

Aircraft Cost (1) \$ _____/hr (2) \$ _____/hr Instructor's Fee: \$ _____/hr

I certify all of the information stated above is true and correct.

Signed _____ Date _____

Print Name _____ Title _____

School _____

Address _____

Telephone (_____) _____

DISCLAIMER

Neither the New Orleans Chapter of The Ninety-Nines, Inc., the Southeast Section of The Ninety-Nines, Inc., The Ninety-Nines, 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 flight training or activities relating thereto. The recipient agrees to sign a hold-harmless agreement in favor of said entities upon receipt of the scholarship and before any flight is made. The applicant, by signing below, agrees to the terms of this disclaimer.

Signed: _____ Date: _____

Print Name: _____

APPLICANT'S DECLARATION

I, _____, declare under penalty of perjury that the information I have given is true and correct and that I meet the requirements for the certificate or rating indicated above.

Signed: _____ Date: _____

Print Name: _____