



3800 St. Lucie Boulevard, Fort Pierce, Florida 34946, 772-466-4822

Application for Enrollment

Associate of Science Degree Program: Aeronautical Science

Applying for: Semester/Year (i.e. Spring 2010) _____ Flight Instructor Option ____ Operations Option ____

Deposit Paid \$ _____ Documentation Mailed to Admissions Office? Yes ____ No ____
Amount Date (Deposit and documentation must be received before Application will be Processed)

Name (family/surname) Last _____ First _____ Middle _____
(If you do not have a middle name put xxx in box)

Street Address (where paperwork/visa will be sent) _____ City _____ State _____ Country _____ Zip/postal code _____

Name of parent/guardian (if student is under 18) _____ Phone Number _____

Emergency Contact Name _____ Street Address _____ City _____ State _____ Country _____ Postal Code _____ Phone _____
Male ____ Female ____

Country of Birth _____ Country of Citizenship _____ Date of Birth _____ Age _____ Height _____ Weight _____

Telephone Home _____ Business or Cell _____ Fax _____ E-Mail _____
 Social Security Number _____ Marital Status _____ Occupation _____ Visa Required ____ No ____ Yes

Military Background (if any) _____ Branch _____ Rank _____ Months of Active Duty _____ Last Day of Duty or E.T.S. _____

PREVIOUS FLIGHT EXPERIENCE

Do you currently hold: An FAA pilot certificate? ____ No ____ Yes A valid FAA medical certificate? ____ No ____ Yes
 What type of certificate and rating? _____ What class of medical certificate? ____ 1st ____ 2nd ____ 3rd
 Do you currently hold an ICAO pilot certificate? ____ No ____ Yes Which country and what type certificate and rating? _____

RECORD OF PILOT TIME: Total multi-engine flight time: _____

	TOTAL	Instruction Received	Solo	Pilot in Command	Second in Command	Cross-Country Instruction Received	Cross-Country Solo	Cross-Country Pilot in Command	Instrument	Night Instruction Received	Night Takeoffs and Landings	Night Pilot in Command	Night Takeoffs /Landings /Pilot in Command
Airplanes													
Rotorcrafts													

EDUCATIONAL BACKGROUND (Provide Transcripts and Diplomas/Degrees Earned (transcribed into English))

School, State/Country	From (Month/Year)	To (Month/Year)	Area of Study	Certificate, Diploma or Degree Earned	Copy of Diploma (Yes/No)*