

THE CHARLIE WELLS MEMORIAL AVIATION SCHOLARSHIP
Scholarship/Grant Application (to be completed by the applicant)

Name: _____
(Last) (First) (Middle Initial)

Home Address: _____
(Street Address)

(City) State (Zip Code)

Country: _____ Phone: () _____

Date of Birth: _____

Name of the college to which an award would be sent: _____

Mailing address: _____

Year of school completed by June of current school year: _____

Major: _____ Minor: _____

Career Interests: _____

Please list below the two (2) persons as references who will send recommendations and state their relationship to you. At least one (1) person must be a teacher who has had you in class:

List participation including offices held, awards, honors, etc. Include athletics and school organizations:

THE CHARLIE WELLS MEMORIAL AVIATION SCHOLARSHIP
Recommendation (to be completed by person other than the applicant)

_____ is applying for a scholarship/grant offered by The Charlie Wells Memorial Aviation Scholarship, Inc. You are listed as a reference on the application. The scholarship is to be used toward an aviation-oriented career.

Please feel free to write a letter either in place of, or in addition to this form. We assure you that any information will remain confidential.

1. In what capacity have you known the applicant? _____

2. What are the applicant's strongest characteristics? _____

3. What are the applicant's weakest characteristics? _____

4. If you are a teacher, what subject area(s) do you teach?

5. How would you rank the applicant in the following?

Imagination	Poor	Average	Good	Excellent
Initiative	Poor	Average	Good	Excellent
Responsibility	Poor	Average	Good	Excellent
Emotional Stability	Poor	Average	Good	Excellent
Leadership	Poor	Average	Good	Excellent
Ability to Work with Others	Poor	Average	Good	Excellent
Work Habits	Poor	Average	Good	Excellent
Self Motivation	Poor	Average	Good	Excellent
Intelligence	Poor	Average	Good	Excellent
Communication	Poor	Average	Good	Excellent

