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:		Phor	ne: ()
Date of Birth:			
Name of the colle	ge to which an award	d would be sent:	
Mailing address:			
Year of school co	mpleted by June of c	urrent school year:	
Major:		Minor:	
Career Interests:			
	-		
		erson must be a teacher who has h	
List participation in organizations:	ncluding offices held,	awards, honors, etc. Include athl	etics and school

Other organizations, significant interests, hobbies and/or activities:		
	n your own word, the reasons you feel you des your past accomplishments and your future go	
		_
Signature of Ap	pplicant:	Date:
1. 2.	d application must include: This form. Two (2) completed recommendation forms of Copy of most recent grade transcript.	or letters of recommendation.
Return the app	Dilication, references and grade transcript to: The Charlie Wells Memorial Aviation Schola 4 Birch Drive Charles II, 62705,0262	arship
	Chatham IL 62705-0262	
	Check here if you want your completed appl scholarship organizations.	lication to be shared with other such

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Recommendation (to be completed by person other than the applicant)

Wells Memorial Aviation Schola		are listed as a refer		offered by The Charli cation. The
scholarship is to be used toward	d an aviation-orie	ented career.		
Please feel free to write a letter information will remain confiden		f, or in addition to t	his form. We ass	ure you that any
In what capacity have you k	nown the applica	ant?		
What are the applicant's stre	ongest character	ristics?		
3. What are the applicant's we	akest characteri	stics?		
4. If you are a teacher, what so	ubject area(s) do	you teach?		
5. How would you rank the app	olicant in the follo	owing?		
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

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ecommender's	Name:		
	(Last)	(First)	(Middle Initial)
ddress:			
	(Street Address)		
	(C;+)	04-4-	/7in 0 - 4 - \
	(City)	State	(Zip Code)
hone:	()		

The Charlie Wells Memorial Aviation Scholarship 4 Birch Drive Chatham IL 62705-0262