BRONZE EAGLES FLYING CLUB OF TEXAS

Summer Flight Academy Scholarship Application

Application Deadline: Friday, March 21, 2025

Please Type* or Print Legibly

Student Name:			Date:		
(Last)	(First)	THE COLUMN	(M. L.)	SIMON MANAGEMENT	
Address:			Phone:		
City:			State:	Z ip:	
E-mail Address:			Height:	Weight:	
Date of Birth:			Age:	Gender:(Male/Female)	
(Month) Name of School:	(Day)	(Year)	School Dist	(Male/Female)	
Grade: G.P.A	Major Subject	(s):			
Hobbies:				The second	
How Did You HEAR About Our P	ROGRAM?	A COLUMN TO SERVICE STATE OF THE SERVICE STATE OF T	N Y	11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1	
				75	
Name of Parent: (Mother)		(Phone)	(Occ	upation)	
Employer:				• 370018300	
	V SE	(Email Addre	SS)		
Name of Parent: (Father)		(Phone)	(Occ	upation)	
Employer:					
Name of Emergency Contact:		(Email Add Em		rgency Phone:	
Gross Family Income: \$	SPONSORIN	G CHAPTER:	- Western		
X		7			
Signature of Pilot Student			Date		
X					
Signature of Parent			Date		

^{*}Attach the completed BPA SFA Application, original birth certificate, government picture identification, proof of family income (IRS W-2 Form), last report card/transcript, essay, and three (3) letters of recommendation and the corresponding referee's forms.