

**ANTELOPE VALLEY
NINETY-NINES**

FUTURE WOMEN PILOTS PROGRAM

MEMBERSHIP: Any female shall be eligible for membership in the Antelope Valley Chapter of the Future Women Pilots (FWP) program if she qualifies for Ninety-Nines International, Inc. membership. (Note: International membership for student pilots requires a current student medical and this special membership is for a maximum period of three years. Student members may not vote or be a proxy at the International level.)

DUES: Ninety Nines International dues are \$30 for the first year and \$20 for the second and third years. Those fees along with Chapter dues will be paid by the Chapter (see Funds Disbursement) for up to three-years. Upon receipt of pilot's license, members shall pay their own member dues.

MEETINGS: The Future Women Pilots are required to attend a minimum of six (6) regular chapter meetings or activities each year. They may vote or hold office at the Chapter and Section level, except for Chapter Chair and Vice-Chair. In addition, the coordinator of the FWP program will establish a calendar of meetings, a minimum of four (4) each year, and FWP's are expected to participate. These meetings may include tower tours, safety meetings, etc.

MENTORS: The Scholarship Committee and FWP coordinator (who is a member of the Scholarship Committee) shall assign mentors. Mentors will be available for FWP's during their ground/flight training and will provide advice, guidance and support along with attending FWP meetings with their assigned student.

**FUNDS
DISBURSEMENT:**

Upon successful completion of the milestones listed below, the indicated amounts will be paid to the FWP or to the FWP's fixed base operator where applicable:

International Membership (\$30 1 st yr/\$20 2 nd & 3 rd yrs)	\$70
Chapter Dues (\$10 each year)	\$30
FAA Written Exam	\$100
First Supervised Solo	\$100
Long Cross Country	\$150
FAA Check Ride	\$200
Books & supplies (receipts required)	<u>\$100</u>
TOTAL:	\$750

TIME LIMIT: The FWP program is a three-year program. If certificate is not attained within the three years, membership from both International and the Chapter terminates. Under special circumstances, extensions beyond the three-year period may be granted.

**ANTELOPE VALLEY
NINETY-NINES**

**FUTURE WOMEN PILOTS
ASSISTANCE AWARDS APPLICATION**

Note: Please type or print. Use separate sheet of paper or the back of this form, if necessary.

Contact the FWP coordinator at both.pilots@verizon.net

For additional information about the AV99s visit <http://www.freewebs.com/av99s/>

Name: _____

Address: _____

Telephone: _____ (Home) _____ (Office)

Email: _____ Birthdate: _____ Age: _____

Highest level of education attained: _____

Currently enrolled in classes? _____ If so, where & what subjects? _____

Occupation: _____

Employer name, address & phone number: _____

How did you learn about our program? _____

Do you plan a career in aviation? _____ If so, what type? _____

This program is designed to assist you in obtaining your pilot's certificate. Are you prepared at this time to finance obtaining your private pilot certificate? _____

Please write a paragraph explaining why you wish to become a pilot (use other side if needed)

NOTE: Personal interview is required with Scholarship committee. If you are accepted into the FWP program, proof of possession of a current student medical will also be required.

Neither the Antelope Valley Chapter of the Ninety-Nines, Inc., the Southwest 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, or 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 and recipient agrees to sign a hold harmless agreement in favor of said entities upon receipt of the scholarship and before any flight is made.

I declare under penalty of perjury that the information I have given is true and correct and that I meet the requirements for this school.

Signature: _____

Date: _____