



Air Training Corps RNZAF Flying Scholarship & National Aviation Course (Power Flying) Application Form

Name: _____ **Squadron:** _____

Notes for completion:

1. This form is to be used for all Flying Scholarship applications. This includes applications to attend the ATC National Aviation Course (Power Flying) conducted at RNZAF Base Woodbourne and to attend the RNZAF Flying Scholarship at RNZAF Base Ohakea. This form is also to be used to apply to attend the National Aviation Course (Power Flying) as a returning student.
2. Attention to detail, correct and legible completion is required.
3. An NZCF 8 is to be completed and forwarded with this application.
4. **RNZAF Flying Scholarship Applicants:** Also attach other suitable documentary evidence to support this application. Previous attendees of the National Aviation Course (Power Flying) should also attach a copy of their course report. All such reports (dated 2007 and later) must include a clearance from the Chief Flying Instructor (CFI) to apply for the RNZAF Flying Scholarship.
5. **National Aviation Course (Power Flying) Returning Student Applicants:** Preference and priority for the National Aviation Course (Power Flying) student positions will be given to those applying for the National Aviation Course (Power Flying) for the first time. If any spaces remain these may be allocated to returning students who, if selected, can also attend the course.
6. Nominations are to be received by the Area CFTSU by the close off date detailed in the NZCF Annual Training Plan. **Late nominations will not be accepted.**

NZCF COURSES AND UNIT CAMPS ATTENDED:

11. List NZCF Courses and Unit Camps Attended: (Include Staff & Student Positions).

Year	Course or Camp Name	Qualification	Year	Course or Camp Name	Qualification

REASON FOR APPLICATION:

12. Why do you consider that you should be selected for the RNZAF Flying Scholarship or the National Aviation Course (Power Flying)? (If applying for the RNZAF Flying Scholarship, also state why you want to join the RNZAF as a pilot).

(Continue on separate sheet, and attach, if necessary)

PART TWO: PARENT/GUARDIAN/CAREGIVER CONSENT

PARENT/GUARDIAN/CAREGIVER:

13. Name: _____ Relationship: _____
(Please Print)

14. Address: _____

(If different to that on the NZCF 8)

15. I certify that should my son/daughter/ward be selected for the RNZAF Flying Scholarship or the National Aviation Course (Power Flying), he/she has my consent to engage in flying training in **civilian** or **military** training aircraft.

16. I acknowledge that I am responsible for arranging any desired personal insurance cover and for the costs associated with flights and obtaining a **Civil Aviation Class 2 Medical Certificate** for him/her (in the case of the National Aviation Course (Power Flying)).

Parent/Guardian/Caregiver Signature: _____ Date: _____

PART THREE: CADET UNIT COMMANDER RECOMMENDATION AND DECLARATION

17. Cadet _____ has been in the ATC for: _____ years _____ months.
(Name)

18. My recommendation is:

CADET UNIT COMMANDER DECLARATION:

19. I certify that should the above named cadet be selected for the National Aviation Course (Power Flying), this ATC Squadron accepts the responsibility of ensuring that the course fees are forwarded to the National Secretary ATCANZ, on receipt of an invoice, before the commencement of the course.

20. I declare that to the best of my knowledge the information in this application, and that the information supplied on the Aviation Questionnaire at Part One of this application is correct.

Name: _____ Rank: _____
(Please Print)

Signature: _____ Date: _____

Cadet Unit Commander: No _____ Squadron, ATC

PART FOUR: CADET FORCES TRAINING AND SUPPORT UNIT RECOMMENDATION

AREA CO-ORDINATORS RECOMMENDATION:

Name: _____

Rank: _____

Signature: _____

Date: _____

Area Coordinator: _____ Area.

PART FIVE: STUDENT QUESTIONNAIRE

FORMAL FLYING TRAINING EXPERIENCE:

21. Power Aircraft Hrs: _____ Gliders Hrs: _____

22. Aircraft Types Flown: _____

23. For **National Aviation Course (Power Flying)** only:

24. Do you have a preference for the type of aircraft you wish to fly during this course?

- Piper Tomahawk / Cessna 152 / State other: _____ / No Preference¹
(Delete as applicable)

25. Do you have a **Class Two Medical Certificate**? ² YES NO³

26. If **yes**, state the Certificate No: _____

- Notes:**
1. You should consider what aircraft you are most likely to continue flying after the course.
 2. If you are successful, you are required to report to the course with this certificate. However, do not delay submitting this return of this application if you do not have one.
 3. You should only proceed to obtain a Class Two Medical Certificate if you are advised that your application has been successful.

Applicant's Signature: _____

Dated: _____

An NZCF 8 must also be attached to this application.